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Report of
The Mental Hygiene Survey
of Cincinnati

CONDUCTED BY

The National Committee for Mental Hygiene

NEW YORK CITY

V. V. ANDERSON, M. D.

Associate Medical Director

UNDER THE AUSPICES OF THE

MENTAL HYGIENE COUNCIL

OF THE

PUBLIC HEALTH FEDERATION

OF CINCINNATI



MAY, 1922



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Published by

The Mental Hygiene Council
of the
Public Health Federation

25 East Ninth St.
Cincinnati, Ohio.

May, 1922

PART I. — The Mental Hygiene Survey
and Recommendations.

PART II. — A Study of the Feeble-minded
AND
A State Mental Hygiene
Program.

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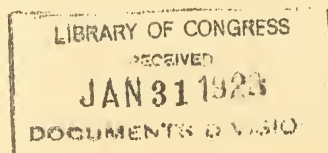
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SURVEY STAFF

V. V. Anderson, M. D.	Director of Survey
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Elizabeth Schmidt.....	Social Worker
W. Margaret Cavender	Secretary
Emily Drier	Volunteer Worker

There were many others who gave a certain amount of time and assistance in connection with the survey.



Letter of Transmittal

March 31, 1922

To the Public Health Federation:

Your Mental Hygiene Council became convinced that in order to formulate a satisfactory program for meeting the mental hygiene problem in Hamilton County it was absolutely essential that we have before us the accurate facts as to just what the problem is with which we are trying to deal. We felt that there was no better way of getting this information than through a comprehensive survey by the National Committee for Mental Hygiene if we should be fortunate enough to secure the consent of the National Committee to come here to make such a study.

Accordingly a formal request, officially approved by the Public Health Federation, was made to the National Committee, the consent of the different agencies and institutions which might be included in the survey was secured and this petition submitted on January 7, 1921. We were deeply pleased when the Committee agreed to come here to make the survey.

The National Committee began its work in March, 1921. It is unnecessary to state how broad the survey was in its scope because that is amply included in the pages of the report itself. We feel that this has been one of the most comprehensive surveys of mental hygiene made in any city of the country, that it has been a contribution worth thousands of dollars to this community. We believe that Cincinnati and Hamilton County owe a deep debt of gratitude to the National Committee and to Dr. Anderson and his very competent staff for the excellent work they have done here.

This Council has had presented before it a summary of the findings and recommendations from the survey and we beg to state herewith that we are heartily in accord with them and that we shall bend every effort to have the recommendations of the survey put into effect.

MENTAL HYGIENE COUNCIL OF THE PUBLIC HEALTH FEDERATION
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Mr. E. F. Van Buskirk
Mrs. Murray Seasongood
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Mrs. Helen T. Woolley

Bleecker Marquette, Secretary

ACKNOWLEDGEMENTS

We wish to express our sincere appreciation and great indebtedness to the Vocation Bureau, the City Department of Health, the Superintendent of Schools and the principals and teachers in the public schools of Cincinnati, the staff of the Juvenile Court, the Associated Charities, the Ohio Humane Society (who so kindly furnished us with office quarters), the United Jewish Social Agencies, the Bureau of Catholic Charities, the Superintendent of Longview Hospital, city and county officials having charge of the county jail and of the city and county infirmaries, and finally to the members of the Mental Hygiene Council of the Public Health Federation and to all who have so generously given of their time and advice in the survey.

We hardly know how to express in a few words our grateful appreciation to Mr. Bleecker Marquette, Executive Secretary of the Public Health Federation. It will be impossible to give any idea of the immense help he has been. It is no exaggeration to say that, without his wise counsel and generous and effective assistance, the survey would not have been possible.

Finally, an expression of gratitude is due to the entire survey staff, for their untiring efforts to make this survey a success. The great amount of work in number of hours, though they were long and usually included more than the working day, in no sense, represents their contribution to this study. The enthusiasm they all have felt for their work must have extended itself to others and served a great educational purpose for mental hygiene.

In the preparation of this report, particular mention should be made of the great help received from the Statistical Department of the National Committee for Mental Hygiene, from Mr. Donald Slesinger of the Division on Mental Deficiency, and from Mr. Frank Fearing, Mrs. Flora Mae Fearing, Miss Margaret Cavender, Dr. Rose Dintzess, and Miss Bertha Allen, of the field survey staff.

V. V. ANDERSON, M. D.

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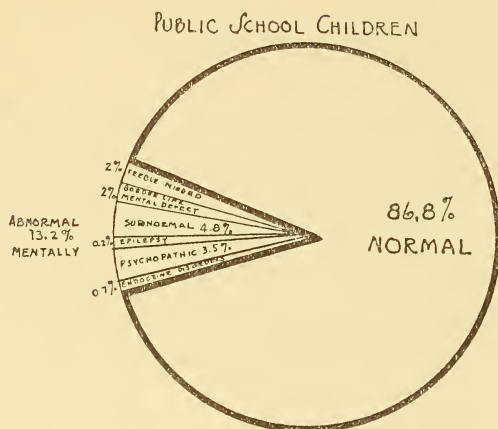
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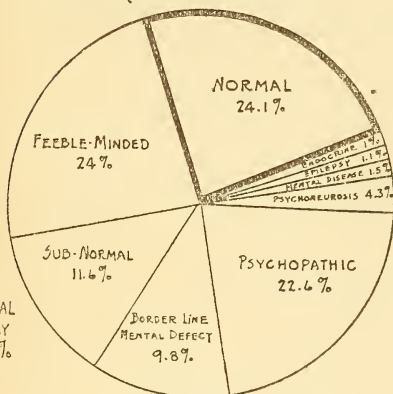
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CHART SHOWING FREQUENCY OF MENTAL ABNORMALITIES AMONG THE THREE MAIN GROUPS IN THE SURVEY

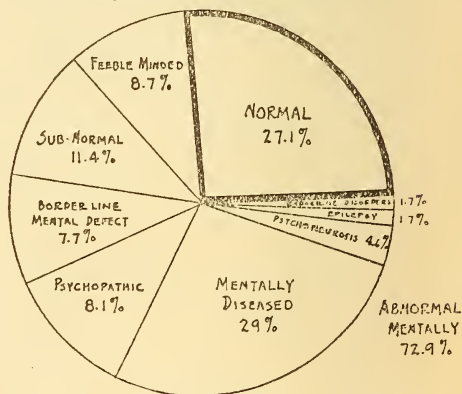


IT IS THIS SMALL GROUP OF MENTALLY ABNORMAL CHILDREN WHO PROVIDE THE VAST MAJORITY OF OUR DELINQUENCY AND DEPENDENCY PROBLEMS LATER IN LIFE.

DELINQUENCY CASES



ADULT DEPENDENCY CASES



A PERSON WHO IS MENTALLY ABNORMAL IS
THREE TIMES AS LIKELY TO BECOME DELINQUENT
OR DEPENDENT AS A NORMAL PERSON.

PART I

GENERAL SUMMARY



THE purpose of this survey was to throw light upon the mental factors involved in various social problems with which this city has to deal, to determine the frequency of mental disease and feeble-mindedness, and what bearings these conditions, as well as other mental conditions, had upon delinquency, illegitimacy, vagrancy, prostitution, dependency, outdoor relief, unemployment, etc.

Studies were made of individuals coming in contact with the Juvenile Court, the Opportunity Farms for Boys and Girls, Hamilton County Jail, the Ohio Humane Society, the Associated Charities of Cincinnati, the United Jewish Social Agencies, the Bureau of Catholic Charities, the Home for the Friendless, the Catherine Booth Home, the Children's Home, the General Protestant Orphanage, the boarding homes children, county and city infirmaries, and finally over 4,000 public school children.

Delinquency

At the Juvenile Court it was found that approximately two-thirds of the children had intelligence quotients over 80 (intellectual retardation was not considered an important factor in their delinquent conduct); approximately two-thirds of the children, when classified from a psychiatric point of view, were found to be suffering from either psychopathic personality, epilepsy, feeble-mindedness, borderline mental defect or mental disease, or were classed as subnormal. Approximately 70 per cent of the Juvenile Court cases were found to be in homes that received the lowest scores on "Parental control and supervision," and "Parental conditions" (these items are explained fully in the text). The homes of the delinquent girls were more unfavorable than those of the boys. Ninety per cent of the delinquent girls came from homes that received the very lowest scores possible on "Parental conditions" and "Parental supervision." The mother of every fifth delinquent girl was a sex delinquent herself. Forty per cent of the fathers of the psychopathic delinquent children were alcoholic. The father of every fourth psychopathic child was guilty of non-support or family desertion.

Only 13 per cent of the girls at the Girls' Opportunity Farm were diagnosed "normal;" 40 per cent were cases of psychopathic personality; 21 per cent were cases of borderline mental defect or feeble-mindedness.

Of the 68 boys examined at the Boys' Opportunity Farm, only 11 were diagnosed as "normal;" 30 boys were either cases of borderline mental defect or were feeble-minded; 15 boys were diagnosed as psychopathic personality.

Out of 100 cases, being the "run-of-the-mine," at the Ohio Humane Society, 66 per cent were found to be suffering from some nervous or mental abnormality. Twenty-six per cent were feeble-minded and 8 per cent suffering from mental disease.

Of 200 individuals studied at the Hamilton County Jail, 74.5 per cent were classified as either cases of mental disease, mental defect, psychopathic personality, epilepsy, psychoneurosis, or subnormal intelligence.

Of a group of unmarried mothers (70 individuals), only 20 were classed

as "normal;" there were 28 cases of borderline mental defect or feeble-mindedness, 10 subnormal individuals, 7 cases of psychopathic personality, 3 of psychoneurosis, and 2 of epilepsy.

Dependency

Of 359 children studied in connection with the Children's Home, the General Protestant Orphanage, the Bureau of Catholic Charities, and the boarding homes, 68.9 per cent were classified as "normal." This is quite in contrast to our group of delinquent children, of whom approximately two-thirds were found to be suffering from some gross nervous or mental abnormality.

Of 61 adult individuals studied in connection with the Bureau of Catholic Charities, four out of every five were found to be handicapped by some abnormal mental condition.

Two hundred and twelve individuals were studied in connection with the United Jewish Social Agencies, as part of a survey of 50 dependent Jewish families. It was found that 50 per cent of these individuals were suffering either from endocrine disorders, mental disease, feeble-mindedness, epilepsy, or psychopathic personality.

Of 122 persons studied as relief cases, in connection with the Associated Charities, being the "run-of-the-mine," approximately 72 per cent were classified in terms of deviation from average normal mental health.

Of a group of unemployment cases studied in connection with the Associated Charities, 71 per cent were found to be suffering from either endocrine disorders, epilepsy, mental deficiency, mental disease, or psychopathic personality, or were distinctly subnormal in intelligence.

Of 394 persons studied at the City Infirmery, only 20.3 per cent of the whites could be classed as "normal." All of the rest were either mentally sick or mentally crippled persons; among the 39 negroes at this institution, only three were diagnosed as "normal."

Of 162 cases studied at the Hamilton County Home, it was found that only 4.5 per cent of the white persons could be classed as "normal" mentally. All of the rest were either mentally diseased or mentally defective. All of the negroes were either feeble-minded or insane.

Public School Children

In order to find out what proportion of the public school children are mentally handicapped, mentally maladjusted, and hence likely to furnish us with the grist for our future juvenile and adult courts, jails, delinquent institutions, dependent institutions, unimprovable cases of dependency, unemployment, illegitimacy, and the like—a study was made of over 4,000 public school children, the idea being to get a fair picture of the average school child. Two per cent of the public school children were classified as feeble-minded, 2 per cent were cases of borderline mental defect, 3.5 per cent were diagnosed as nervous and psychopathic children, 4.8 per cent as subnormal, 0.1 per cent were suffering from epilepsy and 0.7 per cent from endocrine disorders.

It was also found that approximately 6 per cent of the public school children showed conduct disorders.

It is, we believe, largely from these children in the public schools that our social problems of the future are to be drawn. Whatever we spend today in adequately studying, treating, and training these children will be returned one hundredfold tomorrow in the prevention of crime, insanity and dependency.

MENTAL HYGIENE SURVEY AND RECOMMENDATIONS

INTRODUCTION

For several years Cincinnati has been a leader in many movements for social betterment and human welfare. In the field of mental hygiene, this city had already accomplished notable results in two definite directions—the field of juvenile delinquency and that of vocational guidance of public school children. The splendid work done by Mrs. Helen Woolley and Judge Charles Hoffman had served to attract considerable attention throughout this country. The work of these two pioneers in applying to the problems of the public schools and the juvenile court the scientific methods of psychiatry and psychology had already developed in the city of Cincinnati a widespread understanding and appreciation of the mental hygiene movement.

It was but natural that this should result in the development of a group of persons interested in mental hygiene, and thus the Mental Hygiene Council of the Public Health Federation had its origin. This group, in seeking to formulate a program, decided to undertake a complete study of the mental hygiene situation in Cincinnati.

An invitation from the Mental Hygiene Council of the Public Health Federation was extended to The National Committee for Mental Hygiene to conduct this survey and, funds being available through appropriations made by the Rockefeller Foundation for this purpose, the invitation was accepted and the survey was initiated March, 1921.

This survey, which has now been under way for approximately twelve months, has been completed and the present report is a presentation of the essential data gathered during the investigation.

Scope of Survey

The survey staff set itself to determine what sort of problems feeble-mindedness and insanity were to Cincinnati and Hamilton County; what part these and other mental conditions had to play in various social problems, particularly chronic dependency, unemployment, outdoor relief, illegitimacy, family desertions, vagrancy, adult crime, and juvenile delinquency; and finally to determine the frequency of these abnormal mental conditions among public school children.

The survey included, aside from the study of facilities of certain agencies and institutions, a careful examination of the "run-of-the-mine" of the cases coming in contact with the Ohio Humane Society, the Associated Charities, the Bureau of Catholic Charities, 50 dependent families in connection with United Jewish Social Agencies, the "run-of-the-mine" of the Juvenile Court, the Opportunity Farms for Boys and Girls, Hamilton County Jail, city and county infirmaries, the Home for the Friendless, the Catherine Booth Home, the Children's Home, the General Protestant Orphanage, the boarding homes children, and, finally, over 4,000 public school children.

Methods Employed

It was our object to secure in the case of each individual a careful and thoroughgoing physical, mental and social diagnosis.

The mental examination included both psychiatric and psychological methods, the object being in each case, first, to rule out the presence of mental

disease; second, to evaluate the intelligence; third, to study the character and personality make-up of each individual.

In the public school survey, group tests were used to rate intelligence. All children showing intellectual retardation were given individual psychological examinations. Likewise, each child received a careful physical examination, a medical history, an educational rating, and a personality study. All children, then, who appeared to be retarded or showed conduct disorders or who gave a history of personality difficulties or in any way seemed to deviate from the average were given a prolonged, intensive examination. In addition to this a social investigation—a study of home conditions—was made in the case of those children who were diagnosed as feeble-minded, psychopathic, or epileptic.

At the Juvenile Court our effort was to secure a picture of the routine problems presented, and a study of the "run-of-the-mine" was made. Each child was given a routine physical, psychiatric, and psychological, as well as a social, investigation.

Individuals studied in institutions and in contact with various social agencies were given complete physical and mental examinations, but in general did not receive any special social investigation from our survey staff, and the valuable material gathered by these organizations was generously made available and freely used.

It might be worth while to mention here that in making comparative estimates of colored and white children in the public schools, and of colored and white individuals in the juvenile court, institutions, and social organizations, we did not apply the same standards for a diagnosis of feeble-mindedness. In all instances we were more generous in our ratings of negroes, requiring a greater degree of mental retardation before making this diagnosis.

It will be seen later on in the report that we refer frequently to personality difficulties and make some effort at rating individuals according to the outstanding picture that his personality make-up gives us: whether he is emotional—impulsive, restless, sensitive, nervous, excitable, easily discouraged, hot-tempered, "goes to pieces" under difficulties, cannot face situations frankly, etc.; or is egocentric—selfish, inconsiderate, calculating, without feeling and affection, individualistic, etc.; or is inadequate—weak-willed, suggestible, easily led, indolent, unambitious, apathetic, lacking in physical energy, etc.; or is paranoid—suspicious, "persecutory," "has never had a chance or square deal in life;" or is a combination of these various types, or shows no very marked personality difficulties. We appreciate fully how artificial any such classifications must ultimately be and how, from a clinical point of view, we will not be presenting all the facts in the case or always the most important facts simply through a mental diagnosis and a rating of a personality make-up. We fully appreciate, that any serious efforts at treating and adjusting human individuals must be based upon a more intimate and far-reaching knowledge of human forces within the individual himself than are outlined in a simple classification or terminology. However, the object of this survey was not to treat human individuals, but to point out the frequency and importance of certain outstanding factors that must be regarded in any comprehensive program for dealing with such phases of human conduct as would come within the scope of this report.

DELINQUENCY

This problem was approached through a study of the adult delinquents in the Hamilton County Jail, through cases coming in contact with the Ohio Humane Society, and through problems of illegitimacy handled by various agencies and institutions. We had hoped to study the "run-of-the-mine" of the municipal court, but owing to certain difficulties in organizing the machin-

ery of the court in order to make possible such a survey, we found the time involved prohibitive, this to the disappointment of some of the judges, who were anxious for the survey. Here is one of the largest and most serious problems facing Cincinnati. There pass through the municipal court of Cincinnati during one year approximately 14,000 cases—human derelicts, criminals, “ne’er-do-wells,” wife beaters, prostitutes, thieves, and the most varied assortment of human failures to be found in contact with any other agency or institution in the city. The amount of money spent in organizing machinery to deal with these individuals cannot be adequately estimated. Suffice it that it is a vast sum. The pity of it all is that we are failing to accomplish that which we set out to accomplish in dealing with these particular individuals. Almost half of them have been in court before, many of them a great number of times—ten, twenty, thirty, and fifty times. All studies of municipal court problems have shown the great frequency of serious mental and physical conditions amongst these offenders. This particular court has no machinery whatever for recognizing the insane, the feeble-minded, and the physically diseased who are a menace to the general public, and because of this lack of proper facilities, is unable to extend to the general public that degree of protection which it has a right to demand.

The juvenile delinquency was studied in the Juvenile Court and at the Opportunity Farm for Boys and the Opportunity Farm for Girls. At the Juvenile Court we studied 157 delinquent children, constituting the “run-of-the-mine” of this court for the period of our survey. At the Opportunity Farms we studied all of the boys and girls under commitment at the time of our investigation.

JUVENILE DELINQUENCY

THE JUVENILE COURT

The Court of Domestic Relations of Cincinnati is divided into the Juvenile Division and the Divorce Division. The Divorce Division includes the Mothers’ Pension and Dependency Department. In the Juvenile Division are the Boys’ Delinquent Department and the Girls’ Delinquent Department.

STAFF

The staff of the court consists of the judge, one chief probation officer, two assistant chief probation officers, sixteen probation officers, two physicians, one of whom is a psychiatrist, two psychologists, clerks and stenographers.

JURISDICTION

The court is unusual in that it deals with the family as a unit and endeavors to touch all phases of the problems presented. The court has exclusive jurisdiction “in all children’s cases under the Juvenile Court Act, all cases contributing to the dependency and delinquency of children, all cases of divorce and alimony, and in addition thereto concurrent jurisdiction with the Police and Criminal court in cases of failure to provide—sometimes designated as desertion cases.” (Annual report of Court for the year ending September 31, 1919.)

The court attempts to adjust as many cases as possible without official action. The unofficial cases are increasing in number year by year. The hearings in these cases are privately conducted by the assistant or chief probation officers. The more serious cases are heard by the judge and given his official sanction, while in the less serious cases the judge hears a synopsis of the case and legalizes the action. These cases are placed on official and unofficial probation. Official probation includes regular visits on the part of the probation officer, while in the unofficial cases the probation officer makes less frequent visits and extends only general supervision to the individual.

QUALIFICATIONS OF PROBATION OFFICERS

While there are no professional qualifications for appointment of probation officer, the appointments are made through the State Civil Service Commission.

CLINICAL FACILITIES OF THE COURT

The clinical staff at the court consists of two physicians, one of whom is a psychiatrist, and two psychologists. They examine only those cases referred as presenting special problems or because of suspected mental abnormality. The psychiatrist is paid by the court on a part-time basis and acts in the capacity of a consultant. The psychologists are under the supervision of the Vocation Bureau of the Cincinnati Public Schools, and give full time to their court work. Of the 432 cases sent to the psychologists for psychological examinations last year, only 39, or 9 per cent, were referred to the psychiatrist for study. This is unfortunate, as every serious problem behavior case is fundamentally a psychiatric problem. This the court fully appreciates and deprecates the lack of funds for more adequate facilities. The psychiatrist or a psychologist, or both, attend the court hearings.

Except in the case of girls, no routine physical and serological examinations are made. Through the contact made with the Neurological Department of the Cincinnati General Hospital, special cases may be placed in the Neurological Ward for observation pending diagnosis.

ANALYSIS OF MATERIAL GATHERED

Our problem was to study the human material that formed the grist of the Court's mill. To this end careful physical, psychiatric and psychological examinations were made, and medical and behavior histories were taken, of a group of unselected cases. In addition to this, social investigations were conducted in the case of each child; home conditions and other environmental influences were studied.

Of the 201 cases examined at the Juvenile Court, 44 were mothers' pension and dependency cases, and 157 were classed as delinquency cases. Of the 157 delinquents examined, 69.4 per cent were males and 30.6 per cent were females.

The race of these individuals was as follows: 70 per cent were native-born white persons of native-born parents; 16.6 per cent were native born white of foreign born parents; while 13.4 per cent were negroes.

These percentages show that the larger portion of the cases were native-born whites of native-born parentage. The only other significant percentage is furnished by the negro group. The actual ages of these children varied from 6 to 17 years. The median chronological age was 15 years.

Approximately 36 per cent of these children were repeated offenders—had been in court before, some of them a great many times.

Table number 1 gives some idea of the school retardation of these children:

TABLE I.
CHRONOLOGICAL AGES OF CHILDREN UPON LEAVING SCHOOL—
CLASSIFIED ACCORDING TO GRADE ATTAINED

Chronological Age	Total	Second Grade	Third Grade	Fourth Grade	Fifth Grade	Sixth Grade	Seventh Grade	Eighth Grade	High School
7 years.....	1	1	..	..	..	..	..	..	..
9 years.....	1	1	..	..	..	..	..	..	..
10 years.....	4	..	1	2	1	..	..	..	..
11 years.....	8	..	2	2	2	2	..	..	..
12 years.....	10	..	2	..	2	3	3	..	..
13 years.....	28	..	..	1	7	5	7	8	..
14 years.....	31	..	1	1	5	7	6	8	3
15 years.....	37	..	..	..	5	4	16	10	2
16 years.....	32	..	1	..	2	4	7	10	8
17 years.....	5	..	..	..	..	1	1	..	3
TOTAL.....	157	2	7	6	24	26	40	36	16

It is interesting that 16 children were in high school, and that 102 children were in the sixth, seventh, and eighth grades. The amount of retardation is more clearly expressed in table number 2:

TABLE 2—SCHOOL RETARDATION

RETARDATION	MALES		FEMALES		TOTAL	
	Number	%	Number	%	Number	%
None	33	30.3	9	18.7	42	26.8
Retarded 1 year	30	27.5	5	10.4	35	22.3
Retarded 2 years	27	24.8	18	37.5	45	28.7
Retarded 3 years	11	10.1	8	16.7	19	12.1
Retarded 4 years	7	6.4	4	8.3	11	7.0
Retarded 5 years	1	.9	3	6.2	4	2.5
Retarded 6 years						
Retarded 7 years			1	2.1	1	0.6
TOTAL	109	100.0	48	100.0	157	100.0

It is interesting that 73.2 per cent of the children were retarded one year or more. It is also evident that a greater number of girls were retarded than of boys. A careful study of the past careers of these children was made, and certain important facts were brought out. Table Number 3 shows the frequency of past behavior difficulties in this particular group of Juvenile Court cases:

TABLE 3—BEHAVIOR HISTORY

Number outstanding Behavior	BOTH		MALES		FEMALES	
	Number	%	Number	%	Number	%
behavior difficulties.	29	18.5	24	22.1	5	10.4
Stealing	44	28.1	42	38.5	2	4.2
Pugnacity	15	9.5	12	11.0	3	6.2
Sex delinquency....	25	15.9			25	52.1
Sex perversion.....	5	3.2	5	4.6		
Lying	7	4.4	4	3.7	3	6.2
Incorrigible	7	4.4	2	1.8	5	10.4
Gambling	2	1.3	2	1.8		
Truancy	18	11.5	14	12.8	4	8.3
Vagrancy	5	3.2	4	3.7	1	2.1
TOTAL	157	100.0	109	100.0	48	100.0

Eighty-one and five tenths per cent of these cases showed in their careers previous evidence of socially unacceptable conduct. It is clear that stealing and sex delinquency constitute the two outstanding behavior difficulties. It is interesting to note that 18.5 per cent gave no history of past conduct disorders. This group almost altogether constituted those cases that were dismissed from court or that were guilty of minor first offences with no previous career of misbehavior. It is also significant that 22.1 per cent of the boys gave no history of past behavior difficulties, while only 10.4 per cent of the girls gave a history of no past behavior difficulties. More than half of the girls were guilty of sex offences.

INTELLIGENCE RATING

By means of the Stanford revision of the Binet-Simon tests, the mental age of the individual was determined in each instance as distinct from the individual's chronological age. The relation of the mental age and the chronological age is expressed by the so-called "intelligence quotient," which is the

result obtained by dividing the mental age in months by the chronological age in months. In the intelligence quotient, or "I. Q." we have a numerical expression of the intellectual status of the individual. Experience has given certain rough values to the various intelligence quotients. Thus individuals making an intelligence quotient of between 90 and 100 are called "normal" in so far as their intelligence is concerned. Those making an intelligence quotient of below 60 are usually mentally defective. These classifications are not hard and fast, but are of great aid in arriving at a final mental diagnosis. (We did not limit our diagnosis of mental defect to include purely an intelligence estimate.) The distribution of these intelligence quotients is shown in Table 4:

TABLE 4—INTELLIGENCE QUOTIENTS

Intelligence Quotient	Number	Per Cent
40-49	4	2.5
50-59	1	0.6
60-69	17	10.8
70-79	29	18.6
80-89	43	27.4
90-99	30	19.1
100-109	17	10.8
110-119	8	5.1
120-130	1	0.6
Unascertained	7	4.5
TOTAL	157	100.0

Only 3.1 per cent had so low an intelligence quotient as 60 or under; while 13.9 per cent had an intelligence quotient of 70 or under. It will be observed that marked inferiority of intelligence is not an outstanding and important causative factor to be considered in these cases. Sixty-three per cent or approximately 2 out of every 3 persons, had an intelligence quotient over 80. The problems presented by these cases are primarily behavior conditions, conduct disorders, mental maladjustments, in which intelligence testing is of relatively secondary importance, but in which careful career studies from a medical and psychiatric point of view are fundamental. Judge Hoffmann's strong appeal for proper equipment along these lines should receive widespread approval. Table 5 shows the relation of mental age to chronological age:

TABLE 5—MENTAL AGES OF CHILDREN CLASSIFIED ACCORDING TO CHRONOLOGICAL AGE

Chronological Age	Total	VI	VII	VIII	IX	X	XI	XII	XIII	XIV	XV	Unascert'd.
7 years.....	1	1	..	..	..	..	..	..	..	..	..	..
9 years.....	1	..	1	..	..	..	..	..	..	..	..	..
10 years.....	4	..	..	..	1	..	2	1	..	..	..	..
11 years.....	8	..	..	1	4	1	1	1	..	..	..	..
12 years.....	10	..	..	1	..	4	1	1	1	1	1	..
13 years.....	25	..	..	1	3	5	4	6	1	3	2	..
14 years.....	25	..	1	..	2	4	7	3	5	2	1	..
15 years.....	27	..	1	..	3	5	4	3	6	1	2	2
16 years.....	25	..	1	..	1	4	1	6	6	1	2	3
17 years.....	21	..	1	1	..	1	..	3	2	6	4	3
18 years.....	7	1	..	..	1	..	1	..	1	1	1	..
20 years.....	1	..	..	..	..	..	..	..	..	1	..	..
Unascert'n'd.	2	..	..	..	..	..	..	..	..	..	..	2
TOTAL	157	2	5	4	15	24	21	24	22	16	13	9

MENTAL DIAGNOSIS

A fuller understanding of the behavior of these individuals and of their failure to profit by ordinary methods in the school, at home, and out in society, may be had from table 6:

TABLE 6—MENTAL DIAGNOSIS

Diagnosis	Number	Per Cent
Normal	25	15.9
Dull normal	30	19.1
Subnormal	16	10.2
Mental defect	13	8.3
Borderline mental defect....	19	12.1
Psychopathic personality....	49	31.2
Endocrine disorder.....	4	2.5
Epilepsy	1	0.6
TOTAL	157	100.0

Inspection of this table shows that approximately 65 per cent of the cases presented a problem of some type of mental ill health or mental and nervous abnormality. Since only 8.3 per cent of the cases were classed as feeble-mindedness, it is evident that the chief problem of the court, so far as mental diagnosis is concerned, is not to be found in this group.

The psychopathic group, however, represented by nearly one-third (31.2 per cent) of the cases, is more important to consider. Among the characteristics of the psychopath are emotional instability or inadequacy, defective judgment, and other personality difficulties and character defects that are particularly conducive to delinquent conduct. The conservatism of the diagnoses is shown by the comparatively large percentages of "normal" and "dull normal" (35 per cent.) (By this we do not mean that these so-called "normal" delinquents were all well adjusted, mentally healthy persons with no character defects. They were all problems justifying thoughtful consideration.)

RACE AND MENTAL DIAGNOSIS

Twenty-one, or 13.4 per cent, of the cases were negroes. This negro group was compared with the native-born white group so far as diagnosis is concerned. The native-born white group were of parents who were also American born. We have here a comparison of pure native-born stock with the negro group, and while our total number of cases is too small to serve as a basis for conclusions, it is interesting to note that of the negroes over one-third were mental defectives, while of the native-born whites of native parentage, only a sixth were so grouped. On the other hand, over one-third of the native whites were psychopathic, while only slightly over one-fourth of the negroes were so designated.

SEX AND DIAGNOSIS

The percentage distribution of the various diagnostic groups by sex is shown in table 7:

TABLE 7—MENTAL DIAGNOSIS BY SEXES

Diagnosis	MALES		FEMALES	
	Number	Per Cent	Number	Per Cent
Normal ¹	44	40.4	11	22.9
Subnormal	12	11.0	4	8.3
Mental defect ²	21	19.2	11	22.9
Psychopath	28	25.8	21	43.7
Other diagnoses.....	4	3.6	1	2.1
TOTAL	109	100.0	48	100.0

¹ Includes dull normal² Includes borderline mental defect

It becomes evident that the delinquent girl presents a very different problem from the boy. Of all the boys examined in court, 40.4 per cent were classified as normal, while only 22.9 per cent of the girls were placed in this group. It may be remarked that nearly half of the girls were diagnosed as psychopathic, while only one-fourth of the boys were so designated.

MENTAL DIAGNOSIS AND FREQUENCY OF OFFENSE

Exactly 100 cases or 63.7 per cent of the total number, were making their first appearance in court.

Fifty-eight per cent of those appearing in court only once were handicapped by some nervous or mental abnormality, while 91 per cent of the repeated offenders were mentally handicapped. Of those appearing in court once, 21 per cent were psychopathic, while 49.2 per cent of the recidivists were psychopathic. Feeble-mindedness is not as important a problem amongst the recidivist group as psychopathic conditions, for approximately half of all those children who appeared in court more than once were diagnosed as psychopathic.

PERSONALITY MAKE-UP

The following table shows the frequency of personality handicaps amongst these delinquent individuals.

TABLE 8—PERSONALITY MAKE-UP

Personality	Number
No outstanding personality difficulties.....	25
Emotional	45
Egocentric	16
Inadequate	54
Mixed	17
Total,	<hr/> 157

One hundred and thirty-two individuals, or approximately 84 per cent of the total number showed some form of character defect or personality difficulty. Seventy-eight per cent of first offenders showed marked personality difficulties, while 93 per cent of the repeaters showed personality difficulties.

Of the 17 cases who were classified as normal and with no outstanding personality difficulties, 16 were brought into court for the first time. In other words, practically all of these 17 cases represented a really normal group and presented no very difficult problems to the court, certainly in so far as recidivism is concerned.

One out of every three delinquent children appearing before the court was a repeated offender, and approximately all of these repeated offenders showed marked character defects and personality handicaps. These we believe to be matters of great importance in understanding the make-up of the repeated offender.

PHYSICAL CONDITION

Very careful physical examinations were given to every child. Table 9 shows the frequency of certain outstanding conditions.

TABLE 9—PRINCIPAL SOMATIC DISEASES AND DEFECTS

	Number	Per cent
Enlarged Thyroid	60	38.2
Heart conditions	22	14.0
Enlarged and diseased tonsils	32	20.4
Adenoids	5	3.2
Malnutrition	28	17.8
Enuresis	7	4.5
Clinical symptoms of tuberculosis	8	5.1
Defective teeth	8	5.1
Enlarged cervical glands...	12	7.6
Anemia	13	8.3
Defective speech	12	7.6
Clinical symptoms of syphilis	10	6.4
Defective vision	15	9.6

Approximately 80 per cent of these children showed some physical defect or disease or evidence of physical ill health. The importance of these conditions in considering the child's future health and general welfare should hardly require special emphasis here. Yet the subject in its broad sense has received too little attention particularly in its relation to the child's mental condition and conduct.

We have pointed out that intelligence as determined by psychological tests is not the fundamental factor involved in delinquent conduct. We have called attention to the fact that two-thirds of the problem cases amongst juvenile delinquents have I. Q.'s over 80. We have shown that their difficulty lies mainly in the field of character and personality make-up, that mental conflicts and mental maladjustments are common.

These are psychiatric questions and should be approached from the medical point of view. The physical make-up of the individual is the foundation of his personality. The integrity of the various internal organs has much to do with mental health. Their balanced functioning is essential not only to the physical health of the child, but to the maintenance of normal mental health as well.

The importance of physical factors was brought out in a study made by the writer in the Municipal Court of Boston. "One thousand adult delinquents were studied with the purpose in view of determining what part, if any, routine physical examinations might play in the disposition of a delinquency case in court, and later in the institution of reconstructive measures while on probation. It was found that 85 per cent of those in good or fair physical condition had been and were still self-supporting, while 18 per cent of those found to be in poor or bad physical condition had been and were still self-supporting; that 96 per cent of those regularly employed were found in good or fair physical condition, while only 4 per cent were found to be in poor or bad physical condition; that 86.3 per cent of those who were rated as "never worked" were found to be in poor or bad physical condition. The chances of being self-supporting were more than 4 to 1 in favor of the individual in good physical condition.

"Further, 47 per cent of these individuals, practically every other person, was suffering from syphilis or gonorrhea. Only positive laboratory findings were included.

"Certainly, something more than intelligent advice, short terms of confinement in prison, general supervision in the community and securing employment is needed to solve the problem presented by the delinquent whose physical endurance is rapidly diminishing under a progressive Bright's disease, or the delinquent who is scattering venereal disease into the community. These

may be conditions of more vital importance to his future welfare and to that of the community in which he lives than any other consideration."

The great importance of a searching physical investigation is now made evident from the frequency with which disorders of the ductless glands are encountered. The relationship of endocrine conditions, prolonged ill health, physical disease, malnutrition, etc., to behavior need not further be elaborated here.

THE SOCIAL ENVIRONMENT OF THE JUVENILE

A picture of the environment of 157 children in the Juvenile Court was the aim of the psychiatric social investigation.

SOURCE AND TYPE OF INFORMATION

A home visit and an interview with the mother and father, information secured from neighbors and relatives, careful reading of court and social-agency records, were the sources of information used. A family history, with particular reference to physical and mental defect and social maladjustments, was secured. A personal history, including prenatal and developmental conditions, as well as the story of later school work and behavior difficulties, was sought.

In order to evaluate statistically the complex factors in the homes and neighborhoods, a numerical value or index was given to each home and each neighborhood from which the delinquent came. Detailed descriptions of the method of scoring these homes and neighborhoods will be given in the discussion of such data for the problem school children, and will be briefly mentioned before the record of the statistical findings in this phase of the report.

GUARDIANSHIP OF THE CHILD

The child who has been brought up by one parent alone, or who has had foster parents, or who has been placed in an institution, has frequently lost what he can never regain—a normal family environment. The loss of one parent by death is undoubtedly a handicap.

Fifty-two per cent of these children are not living in homes with both parents. A close connection between the delinquency of the child and failure in guardianship conditions is shown in the following illustrative cases:

Edward was placed in a custodial institution for boys by the Juvenile Court a year before our examination because he had stolen a bicycle. He is now 16 years old and had been at the Special School for Mental Defectives for two years. At the time of our examination he was again in Juvenile Court because he had persistently run away from the institution in which he had been placed.

Examination brought out that he was a fairly well developed boy suffering from thyroid disorder. Psychological tests revealed an intelligence level of nine years. Certain personality difficulties were present. Edward was bad tempered and frequently fights without much provocation. He prefers to stay by himself most of the time, however—just likes to "sit around." When asked as to why he ran away from the institution, Edward was able after considerable thought to state that he "just wanted to see some friends." He said he had not been unhappy but just got tired and walked off.

A psychiatric social investigation was made in this case to determine what factors in the home or heredity might have contributed to the delinquency of the boy. Edward was found to be living in a home which ranked much below the average. The home score was ten. Experience has indicated that any score below 13 is markedly detrimental to the best interests of the child. In Edward's home there was no marked deficiency in such items as neatness and necessities. The family had enough to eat and wear. In size the situation in the home was not so favorable. The father and eight children were living in four rooms in a tenement. It is in the items of parental supervision and parental conditions that the chief deficiencies are indicated; the home receiving the lowest possible scores on both items. Edward's mother died before Edward's first delinquency. Edward's father is illiterate and alcoholic. He had deserted the family on several occasions. Edward's family have been in contact with social agencies, according to the Confidential Exchange, since 1917.

It was further found that Edward had a feeble-minded and syphilitic brother. Another brother was illiterate and a sister was in a correctional institution for girls as a sex delinquent.

We have in Edward's family a group of individuals who have already contributed delinquents to the community. A background is furnished for this mentally defective boy which causes him to be not unaccustomed to delinquent behavior.

VAGRANCY

Lester, white, age 16. Intelligence Quotient, 63. Diagnosis, feeble-minded. Personality, inadequate. Offense, vagrancy. Home Index, 11. Neighborhood Index, 9.

Personal History and Guardianship Conditions. Mother died ten years ago. Father immediately sent his four children to the court for placement. The three girls were placed in good foster homes where they are still doing well. Lester was placed in an orphanage. He ran away at every opportunity. He was sent to the Boys' Opportunity Farm. He again ran away. He was taken by an aunt who well intentioned, but ignorant, provided a home in no way attractive. He was unable to keep a job for more than a few weeks. At the time of the examination he was in poor physical condition. He had congenital cataract, defective speech, and there were clinical evidences of congenital lues. He was in court for again running away.

Remarks. Three make-shift homes have failed. A boy with a defective heredity—an alcoholic father who deserted and mistreated his family, and a mother who died of tuberculosis—has been placed in environments where he never obtained intelligent supervision. Feeble-minded, but in no way vicious, he has nevertheless been a recurring problem to the court.

TRUANCY

Robert, white. Age 13. I. Q., 100. Diagnosis, Psychopath. Personality, Emotional. Offense, Truancy. Home Index, 9. Neighborhood Index, 15.

Personal History and Guardianship Conditions. Father who was alcoholic deserted family when Robert was 9. Mother secured a divorce and married an Indian. This step-father is in no way unkind to the boy but Robert protests violently that his mother should never have married again and that if she was to do so she should have married "a white man." He insists that he hears voices calling him in his dreams to leave home. So far there has been no actual attempt to run away though there is rarely a day that he does not threaten to do so. But there is almost continued truancy from school. He is entirely uninterested in his older sister who has been a sex delinquent. His only concern is for his mother and this he usually manifests by extreme denunciation of her actions.

Remarks. Both the mother and the step-father are entirely lacking in appreciation of the boy's abnormal reaction to the home situation.

Charles, white. Age 12. I. Q., 119. Diagnosis, Pre-psychopathic. Personality, Emotional. Offense, Stealing. Home Index, 19. Neighborhood Index, 25.

Personal History and Guardianship Conditions. Father who was an artist died when the boy was ten. Mother placed two of the children in an orphanage but has kept Charles with her. She runs a boarding house and has little time to supervise the activities of her son. Before the father's death temper tantrums were unusual and never resulted in any thing but punishment. Now the mother, too busy to struggle with the boy, will first refuse him something and then will acquiesce when he becomes excited. He has now been in court twice for "taking things" he wanted but which had been denied him at home.

Remarks. The supervision and discipline of this quick tempered and neurotic child has been entirely in the hands of an inadequate mother who recognizes his difficulties but is unable to cope with them.

While it cannot be definitely stated that the cause of a child's delinquency lies solely in ruptured home conditions, it can be stated that these are important factors to be considered. In the first case, the boy has since six years of age never been in a normal home. He was placed with an aunt who, unintelligent and slovenly, provided a home in no way attractive and exercised a supervision that was sporadic and inadequate. In the second case, the boy protested against the remarriage of his mother and manifested the greatest repugnance to his Indian step-father. His persistent truancy may have represented an attempt to escape from unfavorable home conditions. In the last case, the deficiency in guardianship results from the attempt of an inadequate mother, without the father's aid, to cope with an emotionally unstable child.

This study shows that 58 per cent of the "normal" and dull normal children were living in their own homes with their own parents; while only one-third of the psychopathic children were living in their own homes with their own parents. Two-thirds of the psychopathic children were living under guardianship conditions that produced a great strain upon the child.

Approximately three out of four of the children showing no marked personality handicaps were living in homes where both parents were present; while only 43 per cent of the children with personality handicaps were living in such homes.

THE ONLY CHILD

Approximately one-third of the juvenile delinquents were either only children or had but one brother or sister. Nearly one-half of the psycho-

pathic children were either only children or had but one brother or sister. More than twice as many of the psychopathic delinquents as of the normal children came from small families.

The relationship of the development of personality difficulties to size of families is interesting. This study shows that those children with marked egocentric make-up came from families where they were the only children.

The following case is that of an only child:

Thomas, white. Age, 15. Intelligence Quotient, 87. Diagnosis, Psychopathic personality. **Personality make-up.** Emotional, unstable, impulsive, violent tempered, sensitive, moody. **Offense,** perverted sex practices with smaller boys. **Home Index,** 10. **Neighborhood Index,** 16. Thomas is an only child; mother and father constantly quarrel; home life very unhappy. There has never been a divorce, but parents periodically separate and then return to each other. Mother is a sex delinquent, and father is an alcoholic. The paternal grandmother was insane, and an aunt and uncle are "queer." Thomas is in the seventh grade in school, having repeated the fifth and sixth grades. His general physical condition is good. There has been a past history of repeated stealing. He has been before the Juvenile Court several times before. On one occasion he was placed in an orphanage. There he indulged in perverted sex practices with small boys.

This case is used simply to stress the influence of an indifferent father and mother, whose unhealthy adaptations to life are important causative factors in the delinquency of their child.

SOCIAL MALADJUSTMENTS IN THE FAMILY

We have used the term "social maladjustment," to cover a wide variety of conditions found within the family of the child. We cannot say definitely to what extent these cause delinquent conduct. The material obtained was gathered through personal interviews, court, and social agency records. Evidence of mental defect, marked retardation in school, serious personality handicaps, cases of insanity, epilepsy, various physical diseases and disabilities, criminal and delinquent records, extreme cruelty in the home, alcoholism, illiteracy, etc., were recorded.

In 89 per cent of the families, we found evidence of one or more of the above mentioned social maladjustments.

The average number of maladjustments per family of the delinquent children diagnosed as normal or dull normal was 1.9 per cent; for the group diagnosed as psychopathic, 2.5 per cent; and for the mental defectives, 3.2 per cent.

Families of approximately all of the psychopathic children included in this group showed delinquent tendencies. A great variety of types of delinquency were noted. For instance, 20 per cent of the mothers were sex delinquents; 25 per cent of the fathers of the psychopathic children had been guilty of desertion and non-support; 40 per cent of the fathers of the psychopathic children were alcoholic.

As illustrating the average case with several social maladjustments in the family, the following case may be used:

Samuel, Jewish. Age 12. Intelligence Quotient, 79. Diagnosis, Borderline mental defect and psychopathic personality. **Personality make-up,** Emotional, unstable, impulsive, sensitive, hot-tempered, restless, etc. **Offense,** Stealing.

Mother and father are illiterate. Father is alcoholic and has one jail record. Mother, an invalid, has "sick headaches" during which she is frequently in bed for days. One of Samuel's brothers is in the Special School for Defectives; another brother, who is 6 years old, is in the State Institution for Epileptics; a sister, 10 years old, is at home because she doesn't "learn right." Another sister is a cripple.

Personal History. Prenatal, birth, and developmental history normal. Began school when 6 years of age and was immediately transferred to the Special School for Defectives. He has repeated each grade there. At present he is in poor physical condition, malnourished and with a nervous heart. Six months ago he began to steal. He says, "I can't help taking things. I take them whether I want them or not." In addition to being a high-grade mental defective, the boy in this case is faced by the problem of living in a family every one of whom is mentally or physically handicapped. He is handicapped by both his biological and his social heredity.

We have found that the families of mental defectives furnish a greater number of individuals who have manifested social maladjustments than any other type in this study.

The delinquent boy or girl in the Juvenile Court presents a great variety of problems, one of the most important of which is the family stock and social environment from which they come.

HOME INDEX

In securing a home index, information was sought on each of the following five points:

1. Necessities: the status of the home with reference to the ordinary needs of life.
2. Neatness: the condition of the home in regard to order, sanitation, and health.
3. Size: relative size with reference to the number of persons living in the home.
4. Parental condition: intelligence and degree of harmony obtaining in the home and moral training of the child, etc.
5. Parental supervision: the amount and fairness of control exercised for the welfare of the children.

Each of the five items was graded on a scale of five points, one point representing decidedly unfavorable conditions, five points representing favorable conditions, and two, three and four representing conditions of varying favorability between the two extremes. In determining these values, constant reference was made to the standard scoring sheet published by the California Bureau of Juvenile Research.

The scores given to each of the five items were added to obtain the home index. Experience has attached certain meanings to these numerical values. Homes giving total scores of 12 or below offer in general unfavorable conditions for the children living in such homes. A score of less than 9 indicates a very low social level; 18 was found to be the most frequent score for typical "middle-class" homes. These scores do not, of course, give full expression to the many complex factors in the home that play so large a part in the growth of personality and the development of delinquent conduct, but they are valuable in that they give some rating of the social environment.

Fifty-one per cent of these children were in homes that received a score of 12 or under, while 23 per cent were in homes of the very lowest rating, receiving scores of 9 or under.

Approximately 25 per cent of the delinquent children in this study came from homes in which the lowest rating (1) was given to the items, "Parental conditions" and "Parental supervision," while 69.5 per cent came from homes receiving either 1 or 2 on "Parental conditions" and "Parental supervision." Many of these children, already handicapped by mental and physical conditions, are in homes in which there is friction, lack of intelligent interest, and practically no parental control or supervision.

Unattractive, congested homes also seem to be a factor in the development of juvenile delinquency. Over half of the children come from overcrowded homes where there is but a minimum of privacy, making it necessary for the child to seek recreation and interests outside the home.

Twenty per cent of the mentally defective delinquents came from homes receiving the lowest total score on all items, while 10 per cent of the psychopathic children came from such homes.

Ninety per cent of the feeble-minded children came from homes receiving a score of 1 or 2 on "Parental conditions" (general intelligence, social adaptability, degree of harmony, etc., found among the parents).

In regard to the physical surroundings in the homes, the chief failure seems to lie in the crowded conditions. The following case came from such a home:

James, white. Age 15. Mental Diagnosis, Borderline mental defect. Personality make-up, Emotional, neurotic, unstable, impulsive, etc. Offense, Gambling. Neighborhood Index, 15.

Home Index, 8, (necessities, 1; neatness, 1; size, 1; parental conditions, 2; parental supervision, 3).

The mother and father and nine children lived in four rooms on the third floor of a tenement. The mother is illiterate, "sickly," has given birth to nineteen children, and is unable to give any degree of home control over James.

Approximately 48 per cent of the children in this study lived in homes in which the item of size received one of the two lowest scores—(1 or 2); that is, there was considerable overcrowding. This is particularly a serious matter in the life of girls, not only because of the lack of privacy in their daily life, but because the lack of any place in which to receive friends tends to throw them out on the streets.

The chief failure in the homes of those children diagnosed as psychopathic was in "Parental conditions" and "Parental supervision." The following case illustrates well the influence of bad home conditions:

Charles, white. Age 13. Intelligence Quotient, 126. Diagnosis, Psychopathic personality. Personality make-up, Egocentric and paranoid. Offense, Stealing and repeated running away from home. Home Score, 12, (necessities, 3; neatness, 4; size, 3; parental conditions, 1; parental supervision, 1). Neighborhood Score, 14.

Mother obtained divorce from alcoholic and syphilitic father and remarried within a year. Both she and the stepfather are exceedingly neurotic, very irritable, and over severe. They seem to have little real interest in the boy, but make constant demands upon him for service. Money which he earns as a newsboy is taken from him. Frequently he has rebelled, but always is forced into submission by severe whippings. He has finally been removed from home by the court. In this case there is no lack in any element of the ordinary physical conditions of the home (food, neatness, size, etc.), but the failure lies in the relationship between the child and its parents. It will be noted that the boy is above average in intellectual ability. However, he has been transferred from school to school because of constant truancy. He was finally placed in the Boys' Special, which handles such problem cases. The combination of a child with superior intelligence and unsympathetic and harsh parents has apparently resulted in serious maladjustments.

HOME CONDITIONS OF GIRL DELINQUENTS

When the findings of the survey staff in regard to diagnosis, personality, and behavior difficulties, frequency of offense, etc., were analyzed, it was found that the 48 girls presented a series of much more serious problems than did the 109 boys. A special study was, therefore, undertaken to see if an examination of the social environment of these peculiarly difficult cases could offer suggestive explanations as to the causes of their more serious delinquencies.

When the scores given the homes of these girls are studied, it is found that they consistently come from more unfavorable conditions than do the boys. Less than half of the boys come from homes scoring below 13, over two-thirds of the girls come from such homes.

When the values placed upon the various items are analyzed, it is found that the chief failure in the homes of these delinquent girls is in the parental conditions and supervision. Lower scores were given these two items than for any group studied. Ninety per cent had the very lowest scores of one or two on these two items.

When the 48 cases are studied one after another, a conviction that the social environment of these girls played a most important determining role in the development of their delinquency can scarcely be avoided. Two cases are presented not because they are striking or unusual, but because they are typical; they represent the usual run of the cases found among the girl delinquents.

Edna, white. Age 14. Diagnosis, normal. Personality make-up, inadequate. Offense, sex delinquency. Neighborhood Index, 13. Home Index, 9, (necessities, 3; neatness, 1; size, 2; parental conditions, 1; parental supervision, 1).

Family History. Father, hard-working, unintelligent, and uninterested in children. Mother clearly abnormal mentally, has frequent "fainting spells," has delusions of persecution, considers herself too unwell to leave the house, has long periods of deep depression. One brother married when 17 and deserted his wife before birth of first child. Another brother, aged 12, is now in the third grade and has been diagnosed feeble-minded. Two sisters give a history of marked retardation in school. Three children have died in infancy. A maternal uncle committed suicide. A maternal aunt, though now 50 years old, is reported as being "crazy on men." The home is overcrowded.

Personal History. Prenatal, birth, and developmental history normal. Began school when 6. Is at present in eighth grade and has never repeated a grade. She was brought into court as "incorrigible" by an older sister. She denied having had sex relations of any kind, but the examining physician reports that intercourse has undoubtedly been frequent. She admitted lying and "running the streets" at night. She has been placed upon official probation.

Edna has made normal progress in school. As is indicated by the values given the various items that go to make up the home index, the housing conditions in the home are far from satisfactory. The mother, father, and four children, all over 12 years of age, live in four rooms over a garage. The one toilet in the building is shared with three other families, and is usually in filthy condition. The rooms themselves are always dirty and disorderly, the beds unmade, and the dishes unwashed. The values given the two items in regard to parental conditions and supervision are the lowest possible. The mother is probably psychotic; the father is entirely indifferent. So far as could be learned there was no attempt at supervision or moral training. The father when questioned about his 14-year-old daughter, then in detention at the Juvenile Court, shrugged his shoulders and said: "She's a little roughneck—time she got married."

Lucile, white. Age 17. Intelligence Quotient, 14. Diagnosis, Feeble-minded. Personality make-up, inadequate. Offense, in court because pregnant. Accuses man of rape. Neighborhood Index, 13. Home Index, 6, (necessities, neatness, parental conditions, parental supervision all score 1, size scores, 2).

Family History. Father unable to work because of tuberculosis. Mother is feeble-minded and very emotional. Two brothers are feeble-minded; one is now in state reformatory for rape and theft. One sister is known to be a mental defective and spent 3 years at the State Institution for Feeble-minded. Another sister is 12 years old and is in the fourth grade. The family has registrations from 5 social agencies dealing with problems of health, 2 dealing with delinquency, and 6 dealing with dependency.

Personal History. The mentally defective mother could give no information in regard to prenatal or birth history. An older sister stated Lucile did not walk or talk until 2 years old. She was in the Special School for Defectives until 12 years old. Sent to State Institution for Feeble-minded where she remained 3 years. Returned to Special School for Defectives. When 16 she secured employment in a shirt factory where she earned \$15.00 a week. She has now appeared in the Juvenile Court accusing a man of rape.

The conditions in the home of this defective delinquent defy description. The family is in actual want most of the time; they rarely have enough to eat or to wear. The rooms are filthy and the sanitary arrangements entirely inadequate. The father who has tuberculosis does the cooking for the family. The mother goes out and does scrubbing. Eight children as well as the mother and father live in five small rooms. Neither of the parents are capable of intelligent supervision of the children.

There is constant quarreling. Discipline for the younger children fluctuates between extreme laxness and severity which borders on cruelty; as for Lucille "she's got a job" and no supervision is attempted.

A feeble-minded girl, once institutionalized, has returned to a home that offers no protection and an environment that is in every way a detriment, and at the age of 17 she is to become an unmarried mother.

Only two out of the 48 defective delinquents studied had a social environment that could be considered in any way favorable to the best interests of the child.

NEIGHBORHOOD INDEX

Neighborhood as well as home conditions are of special significance in the development of juvenile delinquency. These conditions for the purposes of this study were given a numerical value or index, in much the same way as the homes previously described.

Each neighborhood was graded on the following five points:

1. Neatness, sanitation and modern improvements.
2. Recreational facilities in the homes and neighborhoods.
3. Institutions and establishments, educational, industrial and social, with reference to their probable moral effect.
4. Social status of residents.
5. Average quality of homes.

A score of 5 on any one item was given when highly favorable conditions were found, and a score of one when very unfavorable conditions were present. The scores given, the five points are added to secure the final

neighborhood index. An index of over 20 indicates in general very favorable conditions; an index below 13 indicates unfavorable conditions; while an index below 9 indicates the very worst of neighborhoods.

For the entire group of juvenile delinquents studied, 8.5 per cent live in neighborhoods scoring over 20, while 26.5 per cent live in neighborhoods scoring less than 13. Nearly one-half come from neighborhoods whose indices lie between 17 and 12, indicating that only fair social conditions prevail.

NEIGHBORHOOD INDEX AND DIAGNOSIS

When the neighborhood indices for the three important diagnostic groups—the normals, the mental defectives, and the psychopaths—are compared, a striking difference is at once manifest.

The mental defectives as a group come from neighborhoods that score much lower than do the children in the other two groups. The median neighborhood score for the normals is 15.43; for the psychopaths, 15.32; for the feeble-minded, 12.83. Ninety per cent of the latter live in neighborhoods that score less than 17, the minimum for moderately favorable conditions.

ANALYSIS OF NEIGHBORHOOD INDEX

As regards the general conditions of sanitation and modern improvements, the neighborhood from which these three groups come do not differ to any considerable degree.

When the values placed upon the other four items are contrasted, a difference is noted. The larger per cent of mental defectives live in neighborhoods receiving the lowest scores. The following is a description of one of the neighborhoods in which mental defectives live: "Little room for recreation in the homes because of overcrowded conditions. The few cheap commercial amusements in vicinity are of low order—penny arcades, cheap dance halls, pool parlors, etc. The children play in streets and alleys."

Only one child not a mental defective was found living in a neighborhood with such conditions.

On the item, "social status of the residents," which includes an estimate of educational and vocational attainments, general moral level, and general behavior, the divergence is very marked. About half of both the normal and psychopathic children come from neighborhoods that scored three on this item—that is, to give a typical example of such a neighborhood, most of the residents had had a grade-school education. The wage earners were tradesman, skilled and unskilled laborers. The moral tone of the district was good and the inhabitants, as a whole, were quiet and well-behaved. About 10 per cent of the normal and psychopathic children came from neighborhoods that scored four or five and showed even better conditions than those just outlined; while 70 per cent of the feeble-minded children came from neighborhoods scoring less than three on this item; 40 per cent came from neighborhoods scoring one. The defective delinquent frequently has defective parents, a defective home, and a defective neighborhood.

Twenty per cent of these children came from neighborhoods with insufficient or unsatisfactory recreational facilities; 33 per cent came from neighborhoods where the social institutions were either unfavorable in the influence they exerted or where there was a dearth of educational, industrial, and the right sort of social institutions. Nearly every one of these children came from neighborhoods where the general social status of the residents was rated low.

CONTACT WITH SOCIAL AGENCIES

In our discussion in the section on social maladjustments, we pointed out that juvenile delinquency is scarcely ever an isolated phenomenon, unrelated to any other social problem. This becomes still more evident when we study the frequency of contact with organized social agencies in Cincinnati of the families of which our juvenile delinquents are members. We

get some idea of the cost of these socially maladjusted families when we find that over 60 per cent of them have had contact with at least one or more social agency in this city besides the Juvenile Court. When the cases were cleared with the Confidential Exchange, it was found that over one-third of the families have had contact with three or more agencies. It is apparent that the appearance of these children in Court is by no means the only problem that their families have presented to the organized social agencies of Cincinnati.

Agencies dealing with dependency, delinquency or general health problems have already handled most of these families. The following case is presented as an illustration of the multiplicity of these contacts with organized social work in Cincinnati.

Harry, white. Age 14. Intelligence Quotient, 88; Diagnosis, Psychopathic; Personality, Egocentric; Offense, Incurable; Neighborhood Index, 14; Home Index, 9.

Clinical Findings and Personal History. Harry has been in court six times as follows: loitering, 2; fighting, 1; incorrigibility, 1; stealing, 1; sodomy, 1. Delinquency began with stealing candy in the ten-cent store. Later arrested for selling papers at night and fighting. Sent to Opportunity Farm—ran away three times. Finally brought into court for bad sex practices. Has run away from home on numerous occasions and has been a vagrant. At the time of the examination Harry was in the seventh grade in the Special School because of truancy. Birth, developmental history and physical condition negative. Boy was stubborn, self centered, gave evidence of no feeling of social responsibility. Lies because he says "Everybody does it to get out of difficulties." When things get difficult at home, he runs away and enjoys a vagrant's existence. Father alcoholic and deserted family.

Agencies Registered: Thirteen, as follows: 4 agencies dealing with delinquency, 3 dealing with dependency, 6 dealing with health. Family has been a client of social agencies since 1914 (no central registrations are available in Cincinnati before that time).

This family have cost the community a large sum in money spent through organized social agencies. Harry is one of the most serious type of delinquents. The ultimate causes of the boy's delinquency are probably only hinted at in our brief survey investigation. It is probable that Harry will cost the community still more, since there is little in the family situation or home environment that is likely to make him a socially competent member of society. The ramifications in all fields of social maladjustments presented by these families is nicely illustrated by the large number of contacts which Harry's family has had with organized social work.

SUMMARY OF JUVENILE COURT FINDINGS

One hundred and fifty-seven delinquents were studied in the Juvenile Court. Sixty-nine and four-tenths per cent were males, and 30.6 per cent were females. A large proportion of all the cases were native born.

The ages varied from 6 to 17 years. The median chronological age was 15 years. Approximately 36 per cent of the children were repeated offenders. Seventy-three and two-tenths per cent of the children were retarded one or more years in school. A greater number of girls were retarded than of boys.

Eighty-one and five-tenths per cent of the cases gave a history of previous conduct disorders. In other words, we have here, in the Juvenile Court, children whose careers showed delinquent tendencies very early in childhood. This points towards the wisdom of equipping our public schools to deal adequately with those children who begin early to show behavior difficulties.

Sixty-seven and five-tenths per cent of these individuals, better than two out of three persons, had an Intelligence Quotient of over 80. Marked retardation in intelligence is not the chief outstanding factor in the delinquency of these children. However, approximately two-thirds may be classified from a psychiatric point of view as suffering from some form of mental abnormality, either subnormal intelligence, borderline mental defect, feeble-mindedness, epilepsy, psychopathic personality, or mental disease.

Fifty-eight per cent of the first offenders were handicapped by some nervous or mental abnormality, while 91 per cent of the repeated offenders

were mentally handicapped. It is also interesting to note that 93 per cent of the repeated offenders showed marked personality difficulties and character defects. Approximately 80 per cent of these Juvenile Court cases suffered from some physical defect or disease or from physical ill health.

The social investigations showed that 52 per cent of the children are not living at home with both father and mother. Fifty-eight per cent of the normal and dull-normal children are living in their own homes with their own parents; while only one-third of the psychopathic children are living in their own homes with their own parents.

For the whole group of juvenile delinquents, approximately one-third are either only children or have but one brother or sister.

In approximately 89 per cent of the families, it was found that other members of the family had shown evidence of one or more social maladjustments. Families of approximately all the psychopathic children showed evidence of delinquent tendencies.

A numerical value was placed on the homes and neighborhoods, information being sought on five points:

1. Necessities.
2. Neatness, sanitation, etc.
3. Size.
4. Parental conditions.
5. Parental supervision and control.

Each of the five items was graded on a scale of five points, one point representing the very lowest and most unfavorable conditions, five points representing the very highest and most favorable conditions, three and four representing conditions of varying favorability between the two extremes. The scores given to each of the five items are added to obtain the home index. Total scores of 12 or below offered unfavorable conditions for the children; 9 indicated a very low social level; 18 was found to be the most frequent score for typical middle-class homes.

Fifty-one per cent of the children were in homes that received a score of 12 or under, while 23 per cent of the children were in homes that received the very possible lowest rating.

On the two items, "Parental conditions" and "Parental supervision," 25 per cent of the delinquent children came from homes in which the lowest rating (1) was given.

Ninety per cent of the mentally defective delinquents were in homes that received a score of 1 or 2 on "Parental conditions." Approximately 70 per cent of all the children studied were in homes that received a rating of 1 or 2, on the items of "Parental control and supervision" and "Parental conditions."

Approximately 48 per cent of the children lived in overcrowded conditions, in homes receiving the lowest scores—1 and 2—on "size."

Less than half of the boys came from homes scoring below 13; over two-thirds of the girls came from such homes.

What has stood out all through this study is that the most important situation as regards home conditions—that is, so far as delinquency is concerned—has nothing to do with "neatness," "cleanliness," "sanitation," "food," and ordinary home necessities, but rather with the attitude of the parents in their own relation to each other, in the control and supervision and moral training of the child. Ninety per cent of these delinquent girls came from homes that received the very lowest scores possible on the items of "Parental conditions" and "Parental supervision."

The same method of scoring neighborhoods was employed. Each neighborhood was graded on the following five points:

1. Neatness, sanitation, and modern improvements.
2. Recreational facilities in the home and neighborhood.
3. Institutions and establishments (educational, industrial, and social) with reference to their probable moral effect.

4. Social status of residents.
5. Average quality of homes.

For the whole group of juvenile delinquents, 8.5 per cent live in neighborhoods scoring over 20, while 26.5 per cent (more than one out of every four), live in neighborhoods scoring less than 13. Approximately one-half came from neighborhoods whose indices lie between 12 and 17.

If this study shows anything, it points definitely to the fact that outside of the child himself, the chief cause for juvenile delinquency is not to be found in the neighborhood or the physical condition of the home, not in the character of food and the income of parents, not in the neatness and sanitation, but in the parents themselves, in their attitude towards each other and towards the child in their own personal influence, in their degree of home control and supervision, and in their moral training of the child.

GIRLS' OPPORTUNITY FARM

The Girls' Opportunity Farm is situated at Wyoming, Ohio, on a tract of 90 acres of land, and has a capacity for about 70 girls. The institution is run on the cottage plan, and there are four large brick buildings of a very modern type which house the girls. The institution is under the jurisdiction of the Director of Public Safety of the City of Cincinnati. It receives girls between the ages of 10 and 18 years, committed by the Juvenile Court. Academic training is provided for all of the girls, grades from the first to the eighth being taught. Some of the girls go to the neighboring village high school. There are two teachers employed by and under the direction of the Cincinnati Board of Education. The girls receive industrial and vocational training. They work on the farm and are taught sewing, short-hand, typing and general domestic service. After commitment they remain here until in the opinion of the superintendent they are fit to be returned to the community. The average length of time that they spend in the institution is about one year. At the age of 21 they are formally discharged by the superintendent. All of the girls receive a physical examination. The hospital facilities are fair, and there is an attending physician. There is one parole officer.

ANALYSIS OF MATERIAL GATHERED

At the time of our study, there were 60 girls at the farm, each of whom received a physical, mental, and social diagnosis. Forty-seven were born in this country and had parents who were born in this country.

The median chronological age for the group was 16 years, or one year higher than that of the Juvenile Court cases studied. Forty-four of the group lay between the ages of 15 and 17 years. Twelve and four-tenths years was the median mental age, while 15 of the group had a mental age of 10 or under. Table 10 shows the relationship of chronological age to mental age.

TABLE 10—MENTAL AGES OF GIRLS CLASSIFIED ACCORDING TO CHRONOLOGICAL AGE

Chronological Age	Total	V	VII	VIII	IX	X	XI	XII	XIII	XIV	XVIII
10 years	1	1	..	..	..	..	..	..	..	..	..
11 "	1	..	..	..	..	1	..	..	..	..	..
13 "	6	..	..	1	..	1	1	1	2	..	..
14 "	8	..	..	..	1	2	..	1	2	2	..
15 "	17	..	..	..	2	2	2	4	6	1	..
16 "	27	..	2	..	2	1	5	9	4	3	1
Total	60	1	2	1	5	7	8	15	14	6	1

TABLE 11—AMOUNT OF SCHOOL RETARDATION

Normal school progress	6
Retarded 1 year	14
" 2 years	16
" 3 "	10
" 4 "	8
" 5 "	3
" 6 "	3

Total, 60

Fifty-four of these girls were retarded one or more years in their school work, rating this on the basis of their chronological age and school attainment.

Twenty had been arrested more than once, were repeated offenders. Of those appearing in court more than once, almost half (44 per cent) were psychopaths, while only 22 per cent were cases of feeble-mindedness or borderline mental defect.

Fifty-five of the girls gave a history of previous behavior difficulties prior to the offense for which they were committed to the institution. This refers to truancy in school, lying, stealing, fighting, bad sex practices, etc.

TABLE 12—MENTAL DIAGNOSIS

Diagnosis	Number
Normal ¹	8
Subnormal	11
Mental defect ²	13
Psychopathic personality	24
Psychoneuroses	3
Endocrine disorder	1

Total, 60

¹ Includes dull normal.

² Includes borderline mental defect.

It is evident from the above table that we are dealing with a highly selected group. These girls in many instances were committed to the Farm only after the Juvenile Court had exhausted all other means of dealing with the problem. There were only 8 who were diagnosed as normal. The most outstanding feature is the very large frequency of psychopathic types—24 out of 60.

TABLE 13—PERSONALITY TYPES

No outstanding personality difficulties.....	3
Emotional	24
Egocentric	8
Inadequate	16
Mixed	9

TOTAL 60

It is very significant that we are dealing with a group of girls who almost universally present outstanding character defects and personality difficulties.

TABLE 14—PRINCIPAL SOMATIC DISEASES AND DEFECTS

Enlarged tonsils.....	11
Heart conditions	4
Clinical symptoms of tuberculosis	5
Enlarged cervical glands.....	14
Defective teeth	27
Defective speech	2
Defective vision	11
Gonorrhea	5
Clinical symptoms of syphilis.....	7
Enlarged thyroid	5
Enuresis	4

TOTAL 95

Fifty-one of the 60 girls suffered from physical defect or disease or gave evidence of physical ill health.

A TYPICAL PSYCHOPATHIC DELINQUENT

The psychopathic delinquent is not a clear-cut type in the sense that the mentally defective or feeble-minded delinquent is. Since there is frequently no intellectual defect in these cases, their identification is not always apparent to the layman. In order to illustrate the type, the following case history is given. While the case here described is not typical in all respects, still, there are certain features which serve to dramatize the difficulties that exist in connection with the management and supervision of this type of case.

Bertha's father and mother were married after her birth. On the father's side there is a history of insanity. Bertha's mother is described as a "feeble sort of person." The mother is a psychoneurotic individual, at one time she claimed that her throat was paralyzed and refused to eat. She later recovered as a result of "electrical treatments."

Bertha first appeared in court after running away from home. At home she had been reprimanded for going with a girl whose influence was not of the proper sort. Bertha persisted in the relationship and finally left home in a temper. However, this was not the first time that Bertha had been a problem both at home and at school. She had been guilty of promiscuous sex relations while a student in High School. When she was caught after running away, she was sent to a maternity home because of a question of pregnancy. She was committed by the court to the Girls' Opportunity Farm where she began to give trouble immediately. She grew very sullen and dissatisfied in the sewing room, her work was changed but she was not suited. She grew pale and thin, would not get out of bed and had to be forced to take medicine.

Next came a period of feigned insanity. She would furtively sneak through the house, take everything she could get her hands on, break loaves of bread in half and munch them like a wild animal. Upon being asked whether she was hungry she would say "no." In the sewing room she would cut up materials with no idea as to what she was going to do with them.

She was scarcely recognizable, however, whenever she had a visitor; she was all life smiling, talkative and prompt.

In order to see how she would react, she was told that she might be paroled. She immediately pulled herself together and appeared to be a normal girl.

She was paroled, and from the moment she was released to her mother she began to "go the pace." She returned to her old companions and became such a problem that her family returned her to the Farm because they were absolutely unable to control her.

After her return she ran away from the Farm on two occasions. On one of the very coldest nights, dressed in a nightgown and patent leather belt, with a string of green beads around her neck she left the Farm. A motorist found her lying in the middle of the road, waving a large pair of shears in the air. When returned to the Farm she claimed to have been attacked by some men in an automobile.

At present she is working comparatively well under supervision, but is a constant problem. She has periods of rage when she talks incessantly. She reviles her immediate family—calls them names although her charges are without foundation in fact.

At the time of our examination she was found to be a well-developed girl of 17 years with no physical defects. She had reached the first year in High School. She was restless, hypersuggestible, impulsive and stubborn. Withal, she was rather frank and likable. She explained all of her peculiar activities in a manner which was, at least, satisfactory to her. She accounted for many of her acts by saying that she always got what she wanted by dramatizing the situation.

Her mental age as measured by the Stanford Revision of the Binet Simon tests was 19 years, giving her an Intelligence Quotient of 118, which ranks her as being considerable above the average, intellectually. However, she showed marked defects of character with outstanding personality handicaps. A diagnosis of psychopathic personality was made and hospital observation recommended.

A psychiatric social investigation was made in this case to determine what factors in the home and neighborhood environment might account in part for her career of misconduct. The method of scoring the homes and neighborhoods is described in the sections which deal with the psychiatric social investigation. It is only necessary to say here that the score represents the social status of the home, taking into account the various elements which go to make up satisfactory conditions. Bertha's home received a total score of 10 as follows: necessities, 3; neatness, 2; size, 3; parental conditions, 1; parental supervision, 1. The neighborhood in which Bertha's home is located scored 1.

A perfect score in both cases would be 25 and any score under 13 represents very unfavorable conditions for the best interests of the child. Analysis of this home score shows important facts. Both parental conditions, that is, the degree of harmony between the parents, their social adaptability and intelligent parental supervision and control receive the lowest possible score.

THE BOYS' OPPORTUNITY FARM

Like the Girls' Opportunity Farm, the Boys' Opportunity Farm receives its cases exclusively through commitment by the Juvenile Court. The Farm is located at Glendale, Ohio, on a tract of 200 acres of land. The cottage plan of housing is used, there being four cottages besides the superintendent's residence. The farm is under the supervision of the Department of Public Safety of the City of Cincinnati, and receives delinquent boys between the ages of 10 to 18 years, committed by the court.

The Cincinnati Board of Education furnishes teachers for the academic and manual training of the boys at this institution. The boys spend approximately one-fourth of their time in shop work and in receiving vocational training, incidental to their activities on the farm and in the dairy.

The colored boys are segregated from the white boys, and the older from the younger boys. A housemaster lives in each cottage. Contagious cases are sent to the City Hospital. Regular medical examination and treatment are given by a physician at the City Hospital.

GENERAL ANALYSIS OF THE DATA GATHERED DURING SURVEY

At the Boys' Opportunity Farm we have a group that is analogous to the group at the Girls' Opportunity Farm in that it deals with mid-adolescent delinquents whose delinquency is of so serious a character as to make necessary their removal from the community. In most cases probation methods have proven inadequate. There were 68 cases studied. Practically all were native born, there being only one foreign boy at the farm. The great majority of the native-born whites also had native-born parents.

There were 29 negro and 39 white boys.

The chronological ages were distributed between 9 and 20 years. The median chronological age was 14 years and 3 months; more than half of the cases were between 13 and 16 years of age.

Forty-eight of these boys were repeated offenders; some had been in court as many as ten times before. The average number of offences of each boy was more than 3. Sixty-three individuals gave a previous history of behavior difficulties, having shown conduct disorders such as truancy, lying, stealing, fighting, etc., for some time previous to their court appearance.

TABLE 15—AMOUNT OF SCHOOL RETARDATION

Normal school progress.....	6
Retarded 1 year	8
Retarded 2 years	13
Retarded 3 years	9
Retarded 4 years	15
Retarded 5 years	11
Retarded 6 years	5
Retarded 7 years	1

TOTAL..... 68

It will be noted that almost half of the cases were retarded in school four or more years. The psychological tests showed that the median mental age is 10 years and 6 months, while the median chronological age is 14 years and 3 months. Table 16, showing mental diagnosis, is very significant:

TABLE 16—MENTAL DIAGNOSIS OF BOYS CLASSIFIED ACCORDING TO RACE AND PARENTAGE

Diagnosis	Total	Native-born Native Parentage	White Foreign Parentage	Negro
Normal ¹	11	7	..	4
Subnormal	8	2	1	5
Mental defect ²	30	11	4	15
Psychopathic personality	15	9	3	3
Other diagnoses	4	1	1	2
TOTAL	68	30	9	29

¹ Includes dull normal.

² Includes borderline mental defect.

Only 11 cases out of 68 were classed as "normal." For ease of presentation the borderline mental defectives and the feeble-minded were classed together though a certain percentage of these former cases did not show sufficient evidence of mental defect to warrant our calling them feeble-minded. Physical condition is shown in table 17.

TABLE 17—PRINCIPAL SOMATIC DISEASES AND DEFECTS

Defective vision	10
Enlarged cervical glands	39
Enlarged tonsils	23
Heart conditions	7
Clinical symptoms of tuberculosis	5
Defective teeth	27
Clinical symptoms of syphilis	4
Defective speech	5
Gonorrhea	2

TOTAL

122

Sixty-one of these boys had some physical defect or disease, or showed some disturbance in physical health.

ADULT DELINQUENCY

The adult delinquent was studied in connection with the Ohio Humane Society and the county jail.

THE OHIO HUMANE SOCIETY

This organization occupies a position midway between the courts and institutions on the one hand, and a private ameliorative agency on the other. It serves in a large measure as a probation department; it is semi-official, and is partly financed from public funds. Originally it was an organization for the prevention of cruelty to animals, but this has become a minor part of its activities. It is in reality an agency for the prevention of cruelty to children, a prosecuting agency in the case of failure to provide on the part of a delinquent husband or father, and it looks after the interests of mother and child in illegitimacy cases. It investigates and prosecutes cases in which there are improper home conditions surrounding minor children and undertakes the protection and placement of these children when it is necessary to break up a home. By order of the court, thousands of dollars every year are paid through this agency to the support of dependent families by deserting husbands.

Not all of the cases handled by the Ohio Humane Society present problems in delinquency. However, they all involve some sort of social maladjustment.

In its preventative work this society comes in contact with a large group of people who might be termed pre-delinquent, although rather infrequently does the society deal with what is popularly termed "crime." All of its problems are behavior problems, and thus fall well into the scope of this phase of our report.

STAFF

Some interesting departures from ordinary procedure are indicated by the personnel of this organization. Two police officers and two officers with police authority are assigned to duty with the Ohio Humane Society. The society has entire direction and control of these officers. This arms it with police power and greatly facilitates the handling of its delinquent cases. Except for the fact that they are in uniform, these officers are in no way different from the regular case investigators on the society's staff. They have become trained social workers. The remainder of the staff consists of three visitors, and an executive secretary, a director of case work, and several clerical assistants. The utilization of police officers in this type of work is a very significant experiment in the socialization of the policeman. The success that has attended this venture indicates the possibilities in properly training and directing policemen in the prevention of crime.

ANALYSIS OF DATA GATHERED

One hundred cases were studied, taken in the order in which they appeared at the society's offices. Not all of these persons were delinquent individuals—for instance, a deserted wife might make a complaint against her husband. However, the object was to get a picture of what sort of persons are dealt with by this organization, whether they were actually delinquent or not. Consequently, a "run-of-the-mine" for a definite period was studied. The following table gives an idea of the classification of the cases that is used by the Ohio Humane Society.

TABLE 18—TYPES OF CASES

Unmarried mother	10
Failure to provide for child.....	69
Failure to provide for parent.....	8
Improper home.....	5
Cruelty	2
Incompatibility	4
Child placement	1
Incorrigible child.....	1
TOTAL.....	100

Sixty-five persons were native whites of native-born parents; 20 were negroes; 8 were native whites of foreign-born parents; and 7 were foreign-born whites.

In age these individuals ranged from 14 to 79 years. The median chronological age was 24.6 years. Seventy-six of the 100 cases were females and 24 were males.

Sixty-one gave no history of past behavior difficulties; 39 gave a history of sex promiscuity, gambling, stealing, fighting, drinking, etc.

The following table shows the mental diagnosis according to sex and color:

TABLE 19—MENTAL DIAGNOSIS

Mental Diagnosis	Total	White	Negroes	Male	Female
Normal	34	29	5	9	25
Subnormal	9	7	2	1	8
Borderline mental defect.....	12	6	6	3	9
Feeble-minded	26	21	5	3	23
Psychopathic personality.....	8	7	1	3	5
Epilepsy	3	2	1	1	2
Mental disease.....	8	8	0	4	4
TOTAL.....	100	80	20	24	76

Sixty-six of the cases showed some deviation from normal mental health or intelligence. Twenty-six of these individuals were feeble-minded, while eight were suffering from mental disease. This is a striking statement of mental conditions and shows that any program for meeting the problems these individuals present to the Ohio Humane Society is certainly limited without a proper mental diagnosis of each individual. The very foundation of all efforts at adjusting these persons must be based upon a knowledge of the individuals themselves.

The physical condition is shown in the following table. Of course, this by no means represents the true picture of the great variety of medical problems presented by each one of these individuals. It is merely a record of certain outstanding conditions recorded by the examiners.

TABLE 20—SOMATIC DISEASES AND DEFECTS

Enlarged thyroid	9
Syphilis	1
Underweight	1
Defective vision	12
Defective hearing.....	2
Diseased hip joint.....	1
Heart conditions.....	2
Anemia	1
Tuberculosis	3
Speech defect	5
Endometritis	1
Perineal tears.....	1
Defective teeth	7
Hernia	3
Adenoids	1
Arterio-sclerosis	1
Vaso-motor angina	2
Diseased tonsils	3
None reported.....	57

Forty-three of these individuals suffered from some physical defect or disease, or gave evidence of some physical ill health.

ILLUSTRATIVE CASES

Tillie, colored, was examined at the Ohio Humane Society. She was 25 years old and claims to have reached the third year in High School. Tillie's father had been arrested on several occasions for cruelty to his family and he had finally deserted them. Tillie's mother had died two years before our examination, and Tillie had been cut adrift with \$900 in cash which her mother had saved after years as a laundress.

Examination revealed that Tillie was in good general physical condition. She gave a history, however, of periodic convulsive seizures which further investigation warranted diagnosing as epilepsy. These attacks had occurred since Tillie was a little girl. Her mother had always told her they were "fits." During the attacks Tillie became quite unmanageable, bit, scratched, and at times had unconscious attacks during which she bit her tongue. Her mental age was only 8 years.

All had gone fairly well with Tillie until her mother's death. Cut loose from any sort of protection at that time, and with \$900 in money, Tillie began to get into difficulties. She made some effort at work—was an usher in a motion-picture theatre, where an attack caused her to be promptly discharged; ran an elevator until another seizure again resulted in her discharge. Two years after her mother's death found her at the Ohio Humane Society penniless and about to become an unmarried mother. Tillie did not know which of several men was the father of her child. In fact, she did not greatly care if some one of them could be forced to support it. She evinced no concern regarding her periodic seizures—they had become a habitual thing in her life. She was talkative, superficial, and rather vain.

This girl, handicapped mentally and physically, was cast adrift in the community in no way equipped to manage her affairs, suffering from a mental condition that made an industrial life practically impossible. The outcome was to be expected and might have been predicted at a much earlier period in her career.

THE CASE OF MAGGIE

The following case indicates some of the difficult problems presented by the individuals with whom the society comes in contact:

Two years ago Maggie's one child, a baby of three years, had been taken from her

because Maggie was a "known prostitute." The child was illegitimate, and although frequently attempts had been made to rehabilitate Maggie, she had resisted all overtures and seemed utterly indifferent to the fate of the child. The Ohio Humane Society had by legal procedures taken the child and placed it in another home. For a time the society kept some track of Maggie, finally she disappeared from sight and the case was placed in the "closed" file.

Two years later Maggie suddenly appeared at the society's offices and demanded to see the executive secretary. An interview was given and Maggie stated that for the last six months she had been "going straight," had been living with her father and mother and had permanently abandoned evil ways. She said that about a year before she had become converted by a religious revivalist and was endeavoring to atone for her sins. She now felt that she was sufficiently re-established on the straight path to undertake her responsibilities in regard to her illegitimate child. She appeared to be absolutely sincere. She was moderately well dressed, although she still bore some evidences of her former dissipation. She was living with her parents and they were known to be self-respecting people of moderate means. Although they had never been able to control her previously, it appeared she was telling the truth when she said that she had been living a very quiet life for at least six months at home.

A very puzzling situation was presented. The child which had been placed in a very superior home was doing excellently. The foster parents were providing the child a home that was very much above the average. On the other hand, Maggie passionately insisted on having the child return to her and gave every evidence that she was rehabilitated in the world. The father and mother backed their daughter's plea. There was something in Maggie's manner that impressed the case worker as being peculiar. Perhaps it was a certain strained note which was not entirely accounted for by the fact that Maggie was a mother seeking for the return of a child. At any rate a mental examination was requested. A cursory study of the social history revealed the facts as they have been stated. However, gentle probing drew out some additional material. Maggie became quite emotional over questions regarding her religious experiences. She stated that she had first "gone bad" at the death of her brother when she was 14 or 15 years of age. She had been much attached to this brother, and although it was many years since his death, she burst into tears at the mention of his name. She stated that this dead brother now appeared to her at regular intervals and that she was acting upon his instructions in asking for the return of her child. Her religious experience was the result of instructions from this dead brother and her whole life since then was an "atonement" to him. She felt that he watched her constantly and was commanding her "to do right." A psychiatric social investigation revealed that Maggie's mother, a woman with marked repressions, also held communion with this brother. Her life was largely tied up with the brother who had long been dead. Maggie and her mother believed absolutely in the reality of this brother's appearance and were hinging their lives very largely around him. Maggie's mental condition was such as to justify a period of hospital care and treatment.

The work being done by this organization deserves the very highest approval. If this particular group of cases in any way represents a picture of the problems dealt with, then it is obvious that, before efforts are made at treatment and social adjustment, a large proportion of the "run-of-the-mine" should receive the most careful and thoroughgoing physical and mental examination.

HAMILTON COUNTY JAIL

The Hamilton County Jail occupies the top floor of the Court House. The treatment of the prisoners is humane in character. However, a criticism may be offered which fits well the situation as presented by the jails and that is as to the lack of profitable employment and training of prisoners. The jail and the workhouse are combined, and the workhouse prisoners are employed at the Cincinnati General Hospital, the city water works, laundry, kitchen, bakery and in keeping the jail clean. However, many prisoners have no employment—many of them serve sentences for months in absolute idleness. It is a most vicious system that permits of the long-continued idleness of criminals in jail. In a way we are contributing to further crime by such methods. The prisoners are segregated as to sex, and an effort is made to separate young offenders from older ones.

Insane prisoners may be detained in jail awaiting commitment. There were two insane at the time of our study. There is no machinery for detecting those who develop insanity while awaiting trial or while serving sentences.

The health of the prisoners is looked after by an attending physician, who comes each day and treats those who are sick. There is no routine physical examination, and hospital facilities are inadequate.

ANALYSIS OF MATERIAL GATHERED

An unselected group of 200 cases was studied at the county jail in the order of their appearance on the official ledgers. This group represents about one-tenth of the total number of individuals who pass through the jail in a year. There were only four females in this particular group studied.

One hundred and three were white and 97 were black.

Of the white, 56 were native born.

The ages ranged from 18 to 79 years, the largest proportion being between the ages of 20 and 29 years.

Table 21 gives some idea of the offences for which these individuals were detained in jail.

TABLE 21—OFFENSES

Group	Actual Offense	Number
Disorderly Conduct—		
	Disorderly conduct.....	10
	Loitering	5
	Traffic violation.....	2
	Gambling	2
	Carrying concealed weapons.....	3
	TOTAL	22
Violence—		
	Shooting to kill.....	11
	Cutting	2
	Fighting	2
	Assault and battery.....	11
	Murder	8
	TOTAL	34
Fraud—		
	Transportation of auto.....	2
	Embezzlement	3
	Forgery	6
	Receiving money under false pretences..	9
	Selling and receiving stolen goods.....	3
	Defrauding inn keeper.....	1
	Conversion of personal property.....	2
	Raising bill.....	1
	TOTAL	27
Theft—		
	Grand larceny.....	17
	Petit larceny.....	14
	Pocket picking.....	4
	Burglary	8
	Robbery	16
	House breaking.....	5
	Stealing auto.....	5
	TOTAL	69
Sex—		
	Rape	4
	Contributing to juvenile delinquency.....	5
	Bigamy	1
	Keeping disorderly house.....	1
	Sodomy	1
	Violating Mann Act.....	2
	Exposing person	2
	TOTAL	16
Miscellaneous—		
	Violating prohibition laws.....	14
	Lunacy	1
	Illicit sale and possession of narcotics....	10
	Failure to provide for family.....	6
	Draft evasion.....	1
	TOTAL	32

Sixty-three per cent of these individuals were repeated offenders. Seventy-nine per cent gave a history of past disorders of conduct such as the following: stealing, fighting, sex delinquencies, sex perversions, drug addiction, alcoholism, lying, vagrancy, gambling, etc. (Ten cases were drug addicts.)

Of this group showing past behavior difficulties, four out of every five were handicapped by some very definite mental abnormality.

Sixty and five-tenths per cent never got further than the fifth grade in the public schools. This includes 12 per cent who never attended school and 4 per cent who attended less than one year. Studying their school record, it may be interesting to note that 55 per cent, while in school, had been retarded four or more years.

Only three per cent were skilled workers.

Forty-seven per cent of these cases had never been married.

TABLE 22—MENTAL DIAGNOSIS

Diagnosis	Total	White	Negro
Normal	51	35	16
Subnormal	27	14	13
Borderline mental defect.....	14	7	7
Feeble-minded	57	6	51
Psychopathic	36	30	6
Psychoneurosis	7	6	1
Mental disease.....	4	3	1
Epilepsy	2	1	1
Undiagnosed	2	1	1
TOTAL.....	200	103	97

Seventy-four and five-tenths per cent of these individuals were classified as either subnormal in intelligence of borderline mental defect, mentally defective, suffering from a psychoneurosis, a psychopathic personality, mental disease or epilepsy. More than half of the negroes were classified as mental defectives, while only 5.8 per cent of the white were called feeble-minded. Twenty-nine and one-tenth per cent of the native whites were classified as psychopathic while only 6.2 per cent of the negroes were so classified.

Seventy-seven per cent of these jail inmates were handicapped by personality difficulties and character defects to a very marked degree.

It may be remarked that 63.5 per cent of the first offenders were classified as either subnormal in intelligence, feeble-minded, mentally diseased, suffering from epilepsy, psychoneurosis, or psychopathic personality, while 82 per cent of repeated offenders were so handicapped. There are nine times as many psychopaths amongst those who have been arrested five times as amongst the first offenders. It is interesting also to note that, taking the repeated offenders as a group, we found that 40.5 per cent were diagnosed as mental defectives.

Forty-one cases admitted that they had been arrested for the first time before they were 19 years of age. More than half of all these jail inmates admitted that they had records of arrest before they were 24 years of age.

Forty-four per cent of these jail inmates were suffering from some marked physical defect or disease or physical ill health.

THE UNMARRIED MOTHER

Illegitimacy and unmarried motherhood are ever-present problems that face practically all types of case-working social agencies. Before the birth of the child, the mother presents a problem in health, and later there is the question of her rehabilitation in the community and the placement of her child. Our present study does not attempt to cover the whole field. However, the mental hygiene aspect of illegitimacy and those mental factors that play so important a part in all types of sex delinquency, cannot be over-emphasized. Mental hygiene is concerned with the kind of individual who gets into social and legal difficulties.

The cases represented in this study were examined at the Ohio Humane Society, the Home for the Friendless and the Catherine Booth Maternity Home.

The Ohio Humane Society probably more than any other case-working agency comes in contact with illegitimacy. The chief concern of this society is the placement of the child and the rehabilitation of the mother. The Home for the Friendless and the Catherine Booth Home are maternity hospitals, and their chief concern is the health of the mother before and after the birth of the child, and the health of the infant.

ANALYSIS OF MATERIAL GATHERED

Of the seventy cases studied, 11 were negroes and 59 were white. Forty-eight of the white persons were native born of native-born parents.

The ages ranged from 18 to 40 years. The median chronological age was 19.4 years, and over half of the cases lay between the ages of 17 and 19 years. With the major portion of the cases under 20 years of age, it is evident that we are dealing with adolescent girls. Not only this, but the majority of these girls were from small country towns while 29 came from definitely rural neighborhoods. Only six girls had ever been arrested.

Approximately 22 of these girls never got further than the fifth grade in school, although 15 girls had completed the grammar grades and nine were in high school, while one had gone to normal school.

Twenty of the girls admitted having been sexually promiscuous, while 40 of them denied any previous sex experience.

TABLE 23—MENTAL DIAGNOSIS

Mental Diagnosis—	Total	White	Negro
Normal	20	18	2
Subnormal	10	7	3
Borderline mental defect and feeble-minded.....	28	24	4
Psychopathic personality	7	7	0
Psychoneurosis	3	3	0
Epilepsy	2	0	2
TOTAL.....	70	59	11

Only 20 of these girls were classified as normal. About two-thirds of the girls who admitted to being sexually promiscuous were diagnosed as mental defectives, while only one-third of the girls who gave no history of previous sex experience were called mental defectives.

Twenty-eight were classified as being either cases of borderline mental defect or feeble-minded.

COMBINED SUMMARY, BOYS' AND GIRLS' OPPORTUNITY FARMS, INDIVIDUALS STUDIED AT OHIO HUMANE SOCIETY, THE UNMARRIED MOTHER GROUP, AND HAMILTON COUNTY JAIL INMATES

SUMMARY OF GIRLS' OPPORTUNITY FARM

There were 60 girls at the Farm, each of whom received a physical, mental, and social diagnosis.

The median chronological age for the group was 16 years. Forty-four were between the ages of 15 and 17 years.

Twelve and four-tenths years was the median mental age, while 15 girls had a mental age of 10 years or under.

Fifty-four of these girls were retarded one or more years in their school work.

Eighteen were repeated offenders. Of those appearing in court more than once, approximately half were diagnosed as psychopathic personality.

A history of previous conduct disorders was obtained in the case of 55 of the girls.

Only eight of the girls were diagnosed as normal; 24 of them were diagnosed as psychopathic; 13 were diagnosed as cases of borderline mental defect and feeble-mindedness.

Fifty-one of the girls suffered from some physical defect or disease or gave evidence of physical ill health.

SUMMARY OF BOYS AT BOYS' OPPORTUNITY FARM

There were 68 cases studied, practically all of whom were native-born. There was only one foreign-born boy. Twenty-nine were negroes and 39 were white boys.

The median chronological age was 14 years and 3 months. More than half of the cases were between 13 and 16 years of age.

Forty-eight of the boys were repeated offenders; many had been arrested as many as ten and some 15 and 20 times.

Histories gathered showed that 63 of these boys had shown previous conduct disorders.

Almost half were retarded four or more years in school.

The psychological tests showed that the median mental age was 10 years and 6 months.

Only 11 cases were diagnosed as "normal;" 30 boys were classed as either borderline mental defect or feeble-minded; 15 boys were diagnosed as psychopathic personality.

Approximately 61 showed some physical defect or gave evidence of physical disease or physical ill health.

SUMMARY OF ADULT DELINQUENCY

Ohio Humane Society

While this organization does not deal altogether with delinquent cases, still the character of problems presented for study could best be grouped under this heading. Out of 100 cases studied, being the "run-of-the-mine," ten were unmarried mothers, 69 were individuals who had failed to provide for their children, eight had failed to provide for a parent, five were cases of improper home, two of cruelty, four of incompatibility, one of child placement, and one was an incorrigible child.

Sixty-five persons were native-born whites of native parents, 20 were negroes, 8 were native whites of foreign-born parents, and 7 were foreign-born whites.

The ages varied from 14 years to 79 years. Seventy-six of the 100 cases were females and 24 were males.

Thirty-nine gave a history of socially unacceptable conduct, including sex promiscuity, gambling, stealing, fighting, drinking, etc.

Sixty-six of these individuals showed some deviation from normal mental health or intelligence, 26 were feeble-minded, eight were suffering from mental disease.

Certainly any program for meeting the problems these individuals present to the Ohio Humane Society will fall short of accomplishment without a proper mental diagnosis in each individual case.

Forty-three of these individuals suffered from some physical defect or disease or gave evidence of physical ill health.

Hamilton County Jail

An unselected group of 200 cases were studied at the county jail in the order of their appearance on the official ledger. This group represents about one-tenth of the total number of individuals who pass through the jail in a year. There were only four females in the group studied. One hundred and three were white and 97 were negroes.

The ages ranged from 18 to 79 years. The largest proportion being between the ages of 20 and 29.

Sixty-three per cent of these individuals were repeated offenders.

Sixty and five-tenths per cent never got further than the fifth grade in the public schools.

Only three per cent were skilled workers.

Forty per cent of the cases had never been married.

Seventy-four and five-tenths per cent were classified as either subnormal in intelligence, of borderline mental defect, mentally defective, suffering from a psychoneurosis, psychopathic personality, epilepsy or mental disease. More than half of the negroes were classified as mental defectives, while only 5.8 per cent of the whites were called mental defectives. Twenty-nine and one-tenth of the native whites were classified as psychopathic personality, while only 6 per cent of the negroes were so classified.

Seventy-seven per cent of these jail inmates were handicapped by personality difficulties and character defects to a very marked degree. It may be remarked that 63.5 per cent of the first offenders showed some evidence of nervous or mental abnormality while 82 per cent of the repeated offenders could be clearly classified as suffering from marked deviations from normal mental health.

Almost half of the cases admitted that they had been arrested for the first time before they were 19 years of age.

Forty-four per cent of these jail inmates were suffering from some marked physical defect or disease or gave evidence of physical ill health.

The Unmarried Mother

A group of 70 was studied. Eleven were negroes and 59 were white girls. Forty-eight of the white girls were native born of native-born parents. The ages ranged from 18 to 40 years.

The median chronological age was 19.4 years.

Approximately 22 of these girls never got further than the fifth grade in school.

Twenty of the girls admitted to having been sexually promiscuous, while 40 denied any previous sex experience.

Ten girls were classified as subnormal, 28 as cases of borderline mental defect or feeble-mindedness. There were seven cases of psychopathic personality, three of psychoneurosis and two of epilepsy. Only 20 girls out of the group did not show some very marked mental abnormality.

DISCUSSION OF DELINQUENCY

We cannot speak too highly of the splendid work being done by the Juvenile Court of this city, in dealing with the problem of juvenile delinquency. This court has received nation-wide attention because of the splendid work it is doing. With it all, Judge Hoffman feels that his machinery is but poorly equipped to handle effectively the complex problems that present themselves daily to his court.

It is quite clear from this survey that the most imperative need of the court is to be found in connection with its clinical equipment. This is most incomplete, as Judge Hoffman himself feels. A full-time psychiatrist and a highly trained psychiatric social worker are urgently needed. This, we believe, could be better taken care of through a central psychiatric clinic for the city as mentioned later on in the report.

In approaching the problem of adult crime, we hardly know what to say. We can state very definitely, however, our convictions that in this direction Cincinnati is not to be envied. The modern methods that have stood the test of years of experience in many cities throughout this country have not yet reached Cincinnati. Adult probation is in its infancy here, and there are

practically no facilities whatever for recognizing insane criminals, or feeble-minded, epileptic and psychopathic criminals who are a menace to the general public and form the very backbone of chronic recidivism through repeated criminal conduct.

In all, we have studied 655 cases. Fifty-one per cent of these individuals were repeated offenders, persons who had been in court time and time again; persons who had repeatedly served sentences in institutions; persons who had behaved in a way at variance from average normal behavior and where behavior had expressed itself in criminal conduct from childhood. This is a serious challenge to our methods of dealing with criminals. It has been estimated that crimes by men with prison records outnumber crimes by other offenders more than 40 per cent.

The whole question of sentencing either juvenile or adult offenders for definite periods of time, is not based on common sense. It is pure guess work to try to say whether a man can reform in a given time. Our attitude of dealing with criminals is still in a large measure one of vengeance. It is a fact that we take little account of individual differences, and of the causes that lead an individual to commit criminal acts. We are still held down by the old conceptions of criminal law and of criminal responsibility. If a man is sane, then he must be responsible and should be punished if he breaks the law.

Sentencing criminals to penal and correctional institutions for limited periods without any reference to the causes for their criminal conduct—causes found within the individuals themselves as well as in their environments—and without any reference to the needs of the individual offender, if he is to be reformed and lead a normal life, is in the same category with sending sick people to hospitals and giving them nothing more than kindly and humane treatment, sanitary surroundings, good food, and then turning them out at the end of an arbitrary period without any reference to whether their illnesses have been improved or not.

It is believed that success in the handling of criminals and in the prevention of crime will depend on the degree of interest we take in developing methods for dealing with delinquent persons as individuals, and not as groups; for determining the causes of their delinquent behavior and for setting in motion machinery looking towards the eradication of these causes and the rehabilitation and readjustment of the individual offender.

The methods mostly in use today for dealing with criminals do not give us a knowledge of the individual criminal himself, and why he acts as he does and yet there is ample evidence in many fields that scientific methods of inquiry have already been developed to a sufficient degree to enable us to ascertain the causes for the failures of certain persons to conduct themselves as they should.

These methods have been applied in many places in dealing with criminals and have resulted in great improvement in the treatment and prevention of crime.

It is believed that the application of scientific methods of investigation to the study of every offender, every criminal, before disposition in court, and the mapping out of a plan of treatment in the light of this careful and comprehensive inquiry, would result in a great reduction in crime.

If this is our purpose, if the aim in view is to protect society and prevent criminal conduct, then we need to get away from philosophical theories and face the facts; we need to think less of responsibility and punishment, of wreaking vengeance on the wrong doer, and to learn more about what sorts of persons commit crime and why they commit crime and, in the light of this, what needs to be done to give the greatest protection to society, on the one hand, and to prevent future criminal careers on the other.

Every court should be equipped with clinical facilities for making physical, mental and social diagnoses. There should be an ample and well-trained probation staff to carry out treatment, supervision, and social adjustment of all individuals who can be handled with safety in the community. Through

such methods the saving of expense will be immense, and real steps will be taken in the prevention of crime.

Penal and delinquent institutions should be organized to carry on in an effective way the education, trade training and physical and mental reconstruction of such offenders as are sent to them, or to segregate permanently those who cannot be returned with safety to the community.

It has now come to be recognized that the great majority of all criminal careers begin in childhood. The most striking thing in the recent crime wave in this country, is the great frequency of crimes of violence committed by very young offenders.

Early, even in the pre-juvenile court age, manifestations of conduct disorders show themselves. Conditions are apparent in public-school children that lead later on to gross criminal behavior. This particular survey shows that approximately six per cent of the public school children showed unacceptable conduct of such a nature as to have come frequently to the attention of school authorities. We call attention to this important fact that the danger of entering upon criminal careers is one of the most serious conditions threatening childhood. These matters may not be regarded lightly. If we are to take serious measures to prevent crime, there is no period so opportune as that of the public school age. The criminals of the future, it is believed, will be drawn mostly from the children who show marked conduct disorders in the public schools.

Proper clinical facilities for the study of the complex behavior problems found in public school children should be provided. The unravelling of each individual problem will require the most expert service. Personal difficulties, unhealthy mental adaptations, mental conflicts, improper home background, nervous and psychopathic parents, bad sex practices and teachings of older children, grave physical disorders, poorly arranged curriculum and a great variety of conditions will be found entering as causative factors in every case.

In short, if this study of delinquency shows anything at all, it shows that the city of Cincinnati is in need of a central psychiatric clinic that will serve the public schools in dealing with the conduct disorders that cannot be handled through the Vocation Bureau, that will serve the Juvenile Court, and—what is of the most urgent consideration in this city at present—will assist in handling the medical and psychological problems of the Municipal Court. Such a clinic will also serve for classification purposes as well as giving advice to all delinquent institutions and agencies dealing with delinquent individuals.

DEPENDENCY

JUVENILE DEPENDENCY

The dependent child was studied in the following agencies and institutions:

1. The Children's Home
2. The General Protestant Orphanage
3. The Bureau of Catholic Charities
4. Boarding Homes

Three hundred and fifty-nine children were examined in the institutions listed above. There are other agencies and institutions in Cincinnati that deal with dependent children, but the agencies named give a fair picture of the situation as it exists in orphanages and placement agencies.

The Children's Home is primarily a placement agency existing for the purpose of placing "homeless children in childless homes and of rendering temporary emergency relief to homeless children." The main building of the home is in the center of Cincinnati, and the branch home is located in an outlying suburb. The latter consists of attractive modern cottages built on a small farm acreage. In the central home a day nursery is conducted. The turnover of the children is very rapid; and it is not the object of the home to give perma-

nent custodial care to its wards, but to place them in foster homes. The equipment, personnel, and general atmosphere of the home are excellent.

The General Protestant Orphanage is one of the oldest and most conservative of the child-custodial institutions in Cincinnati. It is located near the center of the city and exists for the care of "dependent orphans and half orphans." Very little placement work is done, and the institution is primarily a custodial agency of the old-fashioned orphanage type. The equipment is fairly well adapted to the needs of an institution of this sort. This institution is neither better nor worse than the average orphanage where children are dealt with *en masse*.

The children studied at the Bureau of Catholic Charities were part of the family-relief problem with which this agency deals. The description of this agency will be found in the section dealing with adult dependency.

In the boarding homes we have a newer method of approach to our problem. A committee on boarding homes supervises the Boarding Homes Bureau, which undertakes the investigation, placement, and supervision of children in private homes. The boarding-home mother is paid by the bureau for the care of one, two or three children. Each home receives regular supervisory visits by a representative of the bureau. These homes are carefully selected, and such factors as the personality and attitude of the boarding-home mother and the physical equipment of the home are carefully weighed before any child is placed. If the boarding home falls below the standard at any time, the child is immediately removed. In these boarding homes we have the same type of child that is ordinarily placed in a child-caring institution.

ANALYSIS OF MATERIAL GATHERED

One hundred and forty-eight children were examined at the Children's Home, 123 at the General Protestant Orphanage, 41 at the Bureau of Catholic Charities, and 47 in the boarding homes. The boarding-homes children were brought to the examiners at the Council of Social Agencies Building.

These 359 children came in the vast majority of cases from native-born parents. Only five negro children were examined. Two of these were classed "normal." The ages varied from 5 to 18 years, the median chronological age being 10.3 years.

Thirty-two and three-tenths per cent were retarded in school from 2 to 8 years. Many of them, given proper training along manual, industrial, and vocational lines, can be made self-supporting. By investing a small amount in their education now, a large amount can be saved from their support in later years. Of course, some few will be wards of the state as long as they live.

Thirty-five and nine-tenths per cent were at the grade in school that is normal for their age in Cincinnati; while 50.1 per cent were retarded and 10.3 per cent were advanced. Many factors must be taken into consideration in explaining this. While the mental capacity of the child, as will be shown later on, is highly important, yet these dependent children are often retarded for various economic reasons, many having been kept out of school in order to help support the family. Including the one year retarded and the one year advanced with the "at grade" group, we have 278, or 77.4 per cent, of the 359 children close enough to the city norm to be classed as average in intelligence.

TABLE 24—MENTAL DIAGNOSIS

Mental Diagnosis	Number	Per Cent
Normal	247	68.8
Subnormal	46	12.8
Borderline mental defect	24	6.7
Feeble-minded	12	3.3
Psychopathic personality	26	7.2
Psychoneurosis	3	0.8
Epilepsy	1	0.3
Total,	359	100.0

Sixty-eight and eight-tenths per cent of the children were classified as "normal." Our percentage of normal mentality is much higher in this group than in the delinquent group. In the delinquent group, approximately two-thirds of the total number of cases were classified in terms of mental maladjustment or abnormality; while in the dependency group only 31 per cent can be so classified.

Some interesting comparisons between the children handled by the various institutions and agencies may be offered. Among the children in the boarding homes, there was a far greater percentage diagnosed as "normal" than in any of the other groups. Thirty-nine of the children in the boarding homes were so diagnosed. There were no children diagnosed as feeble-minded; four were called borderline mental defectives. This may in part be accounted for by the fact that among the children in the boarding-homes group were cases in which there was no real dependency—in which parents were defraying the expense of the support of the child.

Another difference between the children in the boarding homes and the other groups was found in the almost negligible percentage of psychopaths coming from the boarding-homes group. There was only one case in the boarding-homes group diagnosed as psychopathic personality.

If environment has any causal relation to psychopathic conditions and our social investigation of problem school children would seem to indicate that it does, we should expect to find that the dependent child placed in a private home would show a smaller percentage of these conditions than the child who is placed in an institution where the treatment is not individual, but *en masse*.

Twenty-four and two-tenths per cent showed behavior difficulties—disorders of conduct of such a nature as to have come frequently to the attention of the institutional and agency authorities. The smallest percentages came from the Children's Home group and the boarding-homes group; the General Protestant Orphanage ranked next; and the Bureau of Catholic Charities showed the highest percentage.

As with the public school children, those diagnosed as "normal" were on the whole the best behaved, with the percentage of conduct disorders increasing, till in the case of psychopathic children it reached 19 out of 26. The notable exception was in the group of feeble-minded children, where only 2 out of 12 were in any way troublesome, both of these giving histories of sexual maladjustments. The predominating types of conduct disorder were stealing, lying, stubbornness, fighting, sex promiscuity, and sex perversion. Most of these are not grave defects in themselves, but their seriousness arises from what they may easily become. The greatest care and tact must be exercised in treating what we are forced to recognize as potentially antisocial beings. What is to be avoided is the creating of an antisocial attitude in the child, recalcitrant state of mind that becomes more and more difficult to eradicate as time goes on.

Closely related to these behavior difficulties and often causally connected therewith are the personality variations and handicaps that may be considered as the covert mechanisms which, when put "in drive," issue in overt behavior. Fifty-four and six-tenths per cent of the entire group showed one or more personality difficulties. The children of the boarding-homes group presented the best record, while the Bureau of Catholic Charities and the General Protestant Orphanage gave the highest percentage of personality handicaps among the children. The "normal" children were also normal as far as personality was concerned in practically all cases.

The types of personality make-up that predominated were the emotional and the inadequate, each of which may be due to a variety of causes. It is scarcely strange that some children who have been in the care of dependent and charitable institutions most of their lives should come to feel inadequate, if they are at all sensitive. But a mere statistical statement is only an indication of the direction in which we should travel, nothing more. Careful individual studies alone will reveal the many and varied causes of

these handicapped personalities. Probably nothing is more difficult or more important to study than a child's personality make-up and tendencies.

The median mental age for the group was 8.9 years, and the median chronological age was 10.3 years, a difference of a little more than one year.

Sixty-four and six-tenths per cent of the children showed some physical disease or defect or some evidence of physical ill health. The medical problems involved here are most important to consider. There were 18 cases of heart disease, 30 cases of thyroid disturbance, 46 cases of diseased tonsils, 66 cases showing evidence of glandular enlargement, 14 cases of marked malnutrition, 4 cases of tuberculosis, 1 case of syphilis, 11 cases of anemia, 3 cases of spinal curvature, and a great variety of other conditions. Naturally many children showed defective teeth, defective vision, defective hearing, underweight, etc.

It is difficult to understand how the problems of child management and placement with which all of these agencies have to deal can be properly solved without a knowledge of the mental and physical condition of the child himself. A very difficult problem in individual adjustment is represented in the case of every child.

The following case is illustrative of the complex problems presented by some of these children:

Martha's parents had been dead since she was ten years old, when she had become a ward of a certain child-caring institution. Since her entry into the institution, Martha has been something of a problem, and with the onset of adolescence she has become almost unmanageable. There developed rebellious moods and periods of hilarity followed by periods of sullen resistance. She ran away on numerous occasions, only to be brought back in tears. She was discovered on several occasions in petty thievery. Her school progress was normal. At 14 she had entered High School, and seemed to be getting along successfully in that respect. At the time of our examination, Martha was 16, and showed normal physical development. She was in the second year in High School. Her last escapade was a rather pathetic affair. It had been proven that she had stolen money at a previous holiday season, but she persistently denied the act and no adequate reason for the theft was discovered until candy began arriving for a great many of the smaller girls in the institution, and it was found that Martha was the donor. She remained openly defiant and refused to give any further explanation of her act, although at the time these children had had a sufficient amount of candy from other sources. Psychological examination gave no evidence of intellectual defect.

At the first interview, she denied ever having had any trouble during the time of her stay at the institution, and her whole attitude was one of mild surprise that she should be questioned. Later on the subject of the stolen money and the candy was very gently broached. Martha flushed, became silent, and it seemed that no amount of questioning could elicit any kind of reply. She was absolutely negative. However, after further gentle probing, the examiner was finally able to draw out the story. It seems that Martha had felt keenly her dependency since she had entered the institution. With the approach of adolescence, this feeling had greatly increased. In High School she felt that the teachers and other girls left her alone because she was an "orphan." At the institution she felt that no one understood her, and that they were all "lined up" against her. She had made various futile efforts to gain friendship, but had met with rebuff. After each effort towards receiving some intelligent understanding, there would be a reaction of bitter rebellion, during which period she became hysterical and frequently ran away. The final bid for popularity had been the theft of the money in order to buy presents for the smaller girls. By so doing she had hoped to make herself for once a popular member of her social group. Martha's efforts for social esteem were the basis of her difficulties. Underneath there was a current of feeling that she was a "marked person," different from her fellows and an object of pity. Martha's whole appearance indicated the absence of intelligent understanding. She was rather absurdly dressed in clothes that she said she knew were "not right" and that made her conspicuous. At the time of our examination, the situation had reached the point where Martha was a serious problem. She was shut-in, moody, highly irritable, and the authorities were of the opinion that she was "going crazy."

It must not be forgotten that in the case of Martha there was probably fertile soil for development of mental disorder before she went to the institution. However, the situation had been greatly aggravated by a repressive, routine atmosphere. It was not that Martha had ever been treated unkindly. Those in charge of her felt, and rightly so, that they had been very patient with a girl who was very "hard to manage." She had received more privileges than most of the other girls, but there had been no intelligent understanding of her make-up and the mental conflicts that were the essential causative factors in her behavior. Martha is now a distinctly psychopathic type and there is a possibility that an even more serious mental disorder will develop. Her behavior problems find their origin in her mental conflicts. There is not much doubt that if she had been in skilled hands at an earlier period in her career, much may have been done to prevent the condition which she now presents. As it is, a great deal yet can be accomplished through intelligent handling based upon an understanding of her mental conflicts and mental make-up.

ADULT DEPENDENCY

Adult dependency presents a different picture from that of juvenile dependency. In the one—juvenile dependency—careful study and training, as well as treatment of each child, are the essential needs. In the other—adult dependency—we are dealing with the end results of our failure to recognize important conditions early and to set in motion the proper machinery to prevent more serious after effects.

In adult dependency we see, on the one hand, a failure on the part of orphanages and social organizations to recognize early in childhood conditions within the individual himself that lead later on to social failure—this because these agencies now have no satisfactory place to send their cases for diagnosis and treatment. We see here a lack in the public schools system, of facilities for dealing with children showing serious behavior difficulties, particularly those suffering from nervousness, endocrine disorders, epilepsy and marked psychopathic conditions, all of which make for dependency later on in life if children so handicapped are not properly trained. Some few, probably very few, belong to that unfortunate class that never could have taken care of themselves in life—the very low-grade feeble-minded; while a large number—those suffering from mental disease who are now in need of hospital care rather than financial relief of their dependency—might have been saved from mental shipwreck had they early received proper psychiatric diagnosis and treatment.

BUREAU OF CATHOLIC CHARITIES

Sixty-one adult cases were studied at this bureau, of whom 30 were men and 31 women. Forty-one were native born (18 of native parents), while the 20 foreign born came from 6 different countries.

The physical condition of only 9 of them was considered good; 36 were fair and 16 were poor. These figures are significant, and yet they do not tell all the facts of physical disease and ill health that we found in our examinations. Years of poverty can scarcely be called a builder of robust constitutions, and it is to be expected that these people will be in good health only in rare instances. The entire 61 are at present partially dependent, 20 of them having been so from two to ten years. This dependency means, not that they are receiving training, but that they are being given charitable aid and perhaps help in the finding of jobs. The 41 who became dependent within the last year will in all likelihood remain so unless some chance lifts them out of this condition, or unless something more intelligent and fundamental is done for them than merely giving them financial relief and securing them a temporary job.

Thirty-six of the group had been married, but 20 of the 36 were either widowed, divorced, or separated.

Careful mental examinations of these individuals brought out the facts that 15 were normal, 8 subnormal, 6 cases of borderline mental defect, 4 feeble-minded, 7 psychopathic, 5 psychoneurotic, 1 epileptic, 1 suffering from endocrine disorder, and 13 suffering from mental disease. Such a picture shows how futile it is to attempt the adjustment of dependent individuals without an intimate knowledge of the individuals themselves. Many of these people could have been saved from mental deterioration and serious social failure had they received early in life the proper training and treatment suited to their condition. As it is, a great many of them are now in need of either permanent custodial care or hospital treatment.

Even such a study as the above tells only part of the story. The individual's personality acts as the driving force in all his reactions. Forty-six of this group showed personality difficulties, with emotional and inadequate personalities predominating. These difficulties are both cause and effect of the situations in which these suffering from them are imbued, but once started, they are not to be removed by removing merely the external stimulus. As we have reiterated, the mere statement of types of personality make-up

gives no real understanding of the individual. Each individual is a case unto himself and must be dealt with as such.

These personality handicaps and character defects are often let alone, though they may be ruining a person's whole life, till they issue in overt expressions of antisocial behavior. That is what happened in 10 of the above cases, sex offenses and drunkenness predominating. The mere statement of the frequency of these personality handicaps does not indicate that all of the individuals rated as possessing them are troublesome. It only indicates the vicinity of trouble. As was to be expected, the cases of behavior and personality difficulties are drawn entirely from the ranks of the mentally abnormal, with few coming from the dull and subnormal—the percentages increasing till we find them much larger among the feeble-minded, psychopathic, and mentally diseased.

Given the above conditions, it is scarcely to be expected even in normal times that many of this group will find steady employment. Fifty-nine of them were unskilled in any occupation, only 2 being skilled workers. Only 10 gave a history of having had regular employment, 7 had had no work at all, while 9 had existed doing odd jobs. Only 2 out of the 9 in good health, and 6 of the 36 in fair health were regularly employed. Surely society has little reason to be proud of these 61 people, or of what it has done for them.

FIFTY DEPENDENT JEWISH FAMILIES

(Dr. Rose Dintzess)

The purpose of this study was to determine the mental condition of dependent families coming in contact with the United Jewish Social Agencies. For this study, 50 families taken at random from about 400 families on the current relief records of the United Jewish Social Agencies were subjected to a thorough physical, psychological and psychiatric examination, and the results thus found were correlated with the condition of dependency shown on the records of this agency.

The 50 families chosen comprised 212 individuals ranging in age from 6 to 68 years.

TABLE 25—AGES

Age	Males	Females	Total
6—10 years	43	20	63
11—15 "	27	21	48
16—20 "	8	8	16
21—25 "	..	1	1
26—30 "	1	2	3
31—35 "	6	8	14
36—40 "	7	14	21
41—45 "	10	12	22
46—50 "	7	4	11
51—55 "	4	5	9
Over 55 years	4	..	4
Total,	117	95	212

One hundred and eighty-one showed physical defects or disease of some kind.

Psychological tests showed an average mental age of less than 11 years.

The psychiatric and psychological examinations disclosed only 82 persons with no marked personality difficulties.

The mental diagnosis is shown in the following table.

TABLE 26—MENTAL DIAGNOSIS

Diagnosis	Total	Adults		Children	
		Males	Females	Males	Females
Normal	61	6	2	34	19
Dull normal	45	5	9	19	12
Subnormal	17	5	7	2	3
Borderline mental defect....	14	6	4	2	2
Mental defect	18	6	6	2	4
Pre-psychopathic	13	..	..	12	1
Psychopathic	17	7	6	2	2
Psychoneurotic	19	2	11	1	5
Endocrine	4	..	1	2	1
Mental disease.....	4	2	..	2	..
TOTAL.....	212	39	46	78	49

Twenty-five individuals were found to be totally illiterate, and 30 had never entered any kind of school.

Behavior difficulties were shown in 28 cases.

The majority had had institutional care.

More than half of the individuals (130) were American born, 36 were naturalized citizens and 46 were aliens.

Five individuals had been arrested.

Most of the persons studied came from an urban environment. The rural types were all deficient.

The extent of dependency for the different groups encountered is shown in the following table:

TABLE 27—EXTENT OF DEPENDENCY

	Total	Con- tinuous	Inter- mittent	Occa- sional
Normal	7	2	2	3
Dull normal	7	2	2	3
Subnormal	7	1	3	3
Borderline mental defect....	6	4	1	1
Mental defect	8	3	3	2
Psychopathic	8	1	4	3
Psychoneurotic	4	4	..	..
Mental disease.....	3	1	1	1
TOTAL.....	50	18	16	16

A large proportion of widowhood, as shown in the next table, may aid in explaining part of the dependency:

TABLE 28—MARITAL CONDITIONS

Single	126
Married	72
Widowed	10
Divorced	4
TOTAL.....	212

Most of the husbands were considerably older than their wives, as shown in the following table:

TABLE 29—RELATIVE AGES OF HUSBANDS AND WIVES

	Husband Older	Wife Older
Number of cases.....	29	6
Difference less than five years.....	7	6
Difference from 5 to 10 years.....	14	..
Difference from 10 to 20 years.....	6	..
Difference over 20 years.....	2	..
Average difference.....	8 years	3 years

The age distribution shows an absence of young adults, which emphasizes the fact that dependency is often related to industrial inefficiency, and that young adults are only exceptionally in need of charitable assistance, as was demonstrated by Hornell Hart, in his study of poverty in the city of Milwaukee in 1915.

The family groups were quite diverse, varying from a widower and an only son to a family of two parents and six children, within the ages studied. The large proportion of widows here is certainly one of the potent factors in causing dependency in a number of cases.

The difference between the ages of husband and wife was especially striking. This may be an important contributing factor in dependency, since it implies that the husband may become superannuated while the wife is still maintaining a youthful household. In three-fifths of the cases the husband was over five years older than the wife; in one case as much as 26 years intervened. A study by Miss Edith Hoffheimer, in 1919, indicates that this condition is only an exaggeration of a tendency constantly present among the Jewish people of Cincinnati, which may be due in part to general Jewish custom and in part to the economic pressure and unsocial life of many of the young emigrants here, which causes them to postpone marriage until they become acclimatized or save enough to be able to send back to Europe for a bride.

Physical deficiencies are probably an important factor in the causation of dependency. In every case of family dependency where the head of the family is normal or dull normal, sickness was the only reason given for their application for assistance. Nine per cent of the individuals examined were definitely tuberculous, and about the same number showed signs of a predisposition thereto while another nine per cent showed definite heart lesions or rheumatism. Many complained of gastric disturbances, especially of chronic constipation, and another large group reported bronchitis and inflammations of the upper respiratory passages.

Underweight, bad teeth and defective vision were the most frequent defects disclosed, and are probably of importance in lessening the resistance to more acute disorders. Twenty-three cases of endocrine disturbance, five cases of hernia, five instances of enuresis in children, and only three cases of syphilis were among the unexpected conditions revealed.

The parents generally showed a much lower intelligence quotient than their children, the mothers especially appearing deficient in this respect. In the individual tests these individuals showed rather more concrete and mathematical ability, and an inability to handle abstract ideas, and a lack of general information and of memory. Illiteracy was astoundingly prevalent, and confined exclusively to the older generation. Twenty-five persons were absolutely illiterate, and of the remainder very few could read or write in the English language. Most of these were Russian Jews and had been unable to obtain a public education. They could at best attend only the private Jewish schools (Cheder) where the teaching consists mainly of memorizing prayers, and only the more capable children can learn to read and write. Most of them are artisans or small tradesmen with no need for literacy in their occupations. Some of them started to night schools in English classes, but for lack of incen-

tive and facilities, they soon dropped out. They do not become Americanized, they live among people who speak the same tongue, and find no necessity for changing their customs, and, therefore, continue in the same life that they had led in their own little village in their own country.

The extremely low intelligence quotients of the mothers, averaging only 55, and the intelligence quotients of the fathers, averaging 64, are extremely enlightening when compared with the intelligence quotients of their children, averaging 90. This indicates one of the great difficulties in the way of Americanization work among adults and the greater promise of such work among the children, and reveals an important factor in the uncongenial atmosphere in the homes of many of these emigrant families and the estrangement of the children from their parents, with the loosening of the home ties, and of the bonds of filial respect and obedience.

The language difficulty was met in many cases, but whenever it was felt that the knowledge of English was insufficient to give a true estimate of the mental age of the subjects, performance tests were used instead of the regular Binet-Simon tests.

Closer study of the children revealed the curious facts that the younger children almost uniformly showed a higher intelligence quotient than their elder sisters and brothers, as well as a superior mental diagnosis, while in the physical examination the elder children appeared to better advantage. The regularity of this phenomenon is in accord with the theory of inheritance of acquired characteristics, as interpreted by Caspar Redfield, and applied in this connection by Dr. Martin H. Fischer. Thus the children of younger parents—that is to say, the older children in our table—showed a much lower intelligence quotient and a poorer mental diagnosis than the younger children, whose parents must have been correspondingly older at the time of their birth. And not only is this true in extremes, but it appears to be the general rule among intervening children as well.

Most of the parents were foreign born, but only 10 had been in America less than ten years, and most of the others had been in this country over 15 years. Yet only 36 of the foreign-born adults had become naturalized during that time, and the general low level of mentality, in spite of such a long stay in this country, indicates a lack of capacity for advancement in this group. It is interesting to note that every one who admitted a rural environment in Europe was definitely below normal—showing the effect of lack of progress—from the standards of their previous environment.

The great preponderance of emotionally unstable individuals among parents and children discloses a fundamental psychological background—possibly racial in origin—which may aid in interpreting the prominence of the psychoneurotic and psychopathic types found in this study. The egocentric make-up was generally associated with psychopathic individuals while the inadequate types were generally adults of very inferior mentality.

The psychiatric examination showed that in only two families was every member normal. It is interesting to note that the cause of dependency in these cases was, the death of a husband in the one, and the death of both parents in the other. As may be readily understood, most of the normal and dull normal individuals were children, and as a converse, most of the children were normal in type.

Normal and dull normal individuals are able to meet the exigencies of ordinary life, and become dependent generally only in case of sickness or accident. They generally left Europe to escape pogroms, or military service, or to join relatives in this country.

Subnormal individuals are mostly illiterate and of a low industrial standard. They lack ambition and easily become pauperized, but are apt to attribute their poverty to external causes. Many of them were unable to make a living in the old country, and came to America hoping for better luck.

Cases of borderline mental defect and feeble-minded individuals rarely have any education and in general are chronically dependent. They are seldom skilled, but the adults do odd jobs or peddle. It is especially important to

note that although 22 adults were found to belong to this group, only 10 children were so diagnosed. In all but one case, where one or both parents were so diagnosed, some of their children, especially the younger ones, appeared to be practically normal and in some cases even superior in intelligence and ability.

The psychoneurotic women generally presented a condition that we have called hyperactivity. A few psychopathic women also showed this condition. These women are generally of a higher degree of intelligence, initiative and energy than their husbands but lack an outlet for expressing their individuality and represent somewhat of a reversion to the matriarchal, relics of which are still to be encountered in Jewish life. They are generally poor housekeepers, autocratic and tyrannical at home, repressing their children's individuality, very difficult to get along with, incompatible with their neighbors, and a constant source of friction with the social agencies dealing with their families.

The psychoneurotic men were generally individuals with a pronounced hypochondriac tendency—so often met with in Jewish communities—who had been afflicted with some somatic disease, resulting in general physical weakness.

The psychopathic group were generally men of fair physical and industrial ability who lacked ambition, initiative, and a strong sense of duty. They were, in general, of two sorts. The first, or inadequate type lacks self-respect, and is, therefore, easily pauperized. They are lazy and often neurasthenic, but often show considerable family feeling. The second or egocentric type, are shallow, selfish, and essentially lacking in family feeling. They are prone to desertion and sex promiscuity, are unstable in work, hard to manage, change jobs very often, and are continually having difficulties both with their employers and with their fellow workmen.

One or more of the children of practically every psychopathic parent studied, showed some psychopathic traits from early in life, both at home and in institutions where they happened to be examined, and were consequently diagnosed as pre-psychopathic. These children do not get along well in school, are disobedient at home and give considerable trouble in institutions by fighting, petit larceny, and untruthfulness.

Behavior difficulties were infrequent in this group, suggesting that, for the most part, dependency here is not an outgrowth of delinquency. It may be mentioned in this connection that only five of these individuals had ever been arrested, and these mostly for trivial offences. Family desertion and fighting, usually found in psychopathic men and women, stealing and truancy, or running away, found among their pre-psychopathic children, constitute the main difficulties reported. In other words, as is usually the case, the psychopathic group furnish practically all of the delinquency noted in this study.

An enormous amount of institutional care was reported. Practically every individual had received medical treatment at the Beckman Dispensary; more than half had been at the Convalescent Home; a third had been at the Jewish Hospital; and 45 children had for some time been at the Jewish Foster Home. It must be remembered, however, that the United Jewish Social Agencies utilizes the Convalescent Home as a summer-vacation camp for underweight children, that children are sent there when their parents are in the hospital, and that almost all patients are sent there from the hospital during the period of convalescence. Nevertheless, the figures demonstrate the great significance of disease as an etiological factor in dependency in this group.

The data on duration and extent of dependency were taken from the records of the Jewish Relief Agency and checked over by the superintendent of the United Jewish Social Agencies. About equal numbers of families are found to be totally dependent, partially or intermittently dependent, and receiving only occasional relief. When these figures are compared with the mental diagnosis of the parents, the relationship between mental make-up and economic status is revealed. The normal and dull normal families received only occasional relief—necessitated by the sickness or death of the bread-

winner. The subnormal, borderline mental defectives and feeble-minded on the other hand, tend to be dependent for long periods of time. These constitute the most important problems, since they are likely to become a permanent charge upon the community. The normal families are very "touchy" about their dependency, which was in every case, due to some external cause. The dull-normal families were less sensitive on this point, but were in the main, partially self-supporting. The feeble-minded group, however, took charity as a matter of course. Most of the adults come over with some slight skill in a trade and continue in it—as tailor, shoemaker, etc.—unless they fail, in which case they are apt to take up peddling. Many of the boys sell newspapers. Very few of the women work, as the United Jewish Social Agencies insist that they keep house and take care of their children, a policy that is strikingly at variance with that observed by other social agencies, where the woman is encouraged to go out working or to take in washing. In this connection, attention may be called to the condition of the hyperactive women referred to above, who appear to be suffering from this rule.

As a result of the information obtained in this study of 50 families, definite suggestions and recommendations for the further treatment and care of this group, were given in the case of over 80 individuals, involving 36 families. It is believed that many of these will have a pronounced effect in solving some of the problems in these cases. In addition, it is suggested that every new family applying for relief be given a thorough physical, psychological, and psychiatric examination, as well as a social investigation, and that the following general suggestions be considered:

1. Normal individuals are dependent usually only as a result of disease, and when this is relieved, repeated applications for further assistance should be discouraged.

2. Mentally deficient families must be considered as more or less chronic charges upon the community. It is not generally advisable to expend much money in establishing these in business, but they may often be taught some simple trade, or established in peddling, etc., by which they may become wholly or partially self-supporting. The children in these families are the main reliance for the solution of their problems. They should be watched very carefully to protect them from bad home conditions, and to note the development of defects, and it may often be advisable to give them vocational training to hasten or increase their earning power later on. Specialized industrial training for all defective children is essential if they are ever to be handled safely out in the community.

3. Psychoneurotic individuals of the hyperactive type may well be encouraged to go to work. The neurasthenic type should receive medical treatment and be steadily encouraged in their efforts. The children should be watched and their environment adjusted to overcome emotional instability.

4. Psychopathic individuals require the most tactful and understanding approach and treatment. They should be made to realize their responsibilities, even to the extent of invoking the assistance of the court, and their applications for relief should not be encouraged. Their children must be watched carefully for the development of psychopathic traits.

5. Friendly visitors should observe the children with emotional tendencies. The physical basis for these conditions should be corrected, bad home conditions improved, and outdoor life encouraged. Visiting teachers, visiting housekeepers, or nurses, may do well to instruct the mothers regarding diet—especially as to the use of vegetables and fruits—to prevent the prevalent constipation reported.

6. When new children are to be sent to the Convalescent Home or the Foster Home, care should be taken to notify the matron of psychoneurotic or psychopathic traits, of the presence of feeble-mindedness, epilepsy, and such conditions, in order that appropriate measures may be taken for dealing adequately with these children. An attempt should be made to create, as far as possible, a home atmosphere in these institutions; and an effort should be

made to individualize in the treatment of each child.

7. Children in such institutions should be observed carefully. Such an environment offers a particularly good opportunity for a comprehensive study over a prolonged period, which will make proper diagnosis and suitable treatment possible.

ASSOCIATED CHARITIES

122 RELIEF CASES

Of the 122 relief cases studied at the Associated Charities, 120 were native born, 98 of them of native parents.

Thirty-six were in such poor physical condition as to be in need of urgent medical attention. The great majority of this group—72 out of the 122—have become dependent within the year, while approximately 20 per cent have been dependent from 2 to 9 years. It is notable that the smallest percentage of dependents of over one year is to be found among the normal individuals, while the percentage increases till it includes the majority of the feeble-minded and mentally diseased persons and almost half of the cases of borderline mental defect and psychopathic personality. This is another indication of what early diagnosis, medical treatment, and the right sort of educational training might have done. A great many of those diagnosed as mentally abnormal could have been made into happy useful citizens.

The percentage of married persons among these 122 relief cases is much larger than the group at the Bureau of Catholic Charities. Here 104 were, or had been married—of whom 21 were widowed and 16 unable to live together. Only 18 of the entire group remained single. Thirteen of the 15 cases of borderline mental defect were married, seven of the 11 feeble-minded persons, 2 of the 3 epileptics, 8 of the 11 psychopaths and 20 of the 23 cases of mental disease.

The median mental age of this group was 11 years. (They were all adults.)

The table on mental diagnosis shows that of the 92 whites, 26 were "normal," 5 were subnormal, 10 were cases of borderline mental defect, 9 were feeble-minded, 9 cases of psychopathic personality, 7 cases of psychoneurosis, 3 cases of epilepsy, 2 individuals suffering from endocrine disorders, and 21 cases of mental disease. The mental diagnosis of the negroes ran as follows: "normal" 8, subnormal 9, borderline mental defect 5, feeble-minded 2, psychopathic personality 2, endocrine disorder 2, and mental disease 2.

This table of diagnosis is a striking commentary on our methods of dealing with dependency by old-time methods of relief. Here we have in a large proportion of cases individuals who are mentally sick or mentally handicapped and in a great many cases physically ill, individuals who are in need of hospital care or institutional care. Much of this condition is in a way preventable if we give to these persons, early in the game, proper diagnosis and suitable training and treatment.

Fourteen of these individuals never attended school, but we are not sure that as regards dependency they fared worse than the 98 who did attend school, but received no individual training along industrial and vocational lines to fit them for a job and to earn a living in life; 38 did not go beyond the fourth grade; 55 left school between the fifth and eighth grades. Such problems as the mentally handicapped child presents have in a large measure been considered by preparatory schools and university authorities as unimportant, the usual process being to let them hang on as long as they are able to keep up to a certain intellectual and behavior standard, but to drop them as soon as they become really troublesome. While this is true in many parts of this country, it cannot be said of Cincinnati. The public school system of this city is making unusual strides in the direction of meeting the problems of the special-class child.

Seventy-eight of the 122 individuals showed very marked personality difficulties and character defect. Much might have been done for these cases—much can still be done for many of them—but the present policy of social

workers, which consists of writing them up in their case histories as "queer sorts" and doling out funds for their temporary relief—funds that are in the long run thrown away—leads us nowhere towards solving their problems. Nor does it get us anywhere in clearing up the situation if, when the personality difficulties of these individuals issue in overt behavior, we straightway send them to jail.

In 25 of these 78 cases, personality difficulties did actually issue in overt behavior, of which sex promiscuity (6), drunkenness (3) and fighting (5) predominated. Those classed as "normal" showed no personality difficulties, and did not exhibit anti-social behavior, while the psychopaths almost invariably got into trouble. Of the 25 offenders, 22 misbehaved seriously enough to be arrested, six out of the 22 were repeated offenders. Only 13 of the 122 cases had ever been regularly employed, 31 had had no work, and 78 had done odd jobs, or had done house work at home. None of the individuals classed as feeble-minded, borderline mental defectives, psychopathic personalities, epileptics, or cases of mental disease, had been regularly employed.

The physical condition is a very important factor, only one out of the 36 found to be in poor health had been regularly employed.

ASSOCIATED CHARITIES

100 UNEMPLOYMENT CASES

Of this group of 100, 92 were men and eight were women; 83 were white and 17 were colored; 94 were native-born, 68 of native-born parents.

These were in no sense chronic dependents, 42 being still non-dependent; while 51 of the remaining 58 had become dependent within the last year. The smallest percentage of dependence came from the normal group; five of the seven feeble-minded were dependent, as were eight of the 18 psychopaths, two of the three epileptics and 10 of the 12 suffering from mental disease. This is to be expected, for given chronic unemployment, the normal individuals will always be the last to lose their jobs, and the last to succumb to charitable aid.

Thirty-eight of the group were married.

The median mental age for the group was 12 years; 37 had a mental age of 10 years or under. The table of mental diagnosis shows that 28 were "normal," 17 subnormal, 11 were cases of borderline mental defect, seven were feeble-minded, 18 were cases of psychopathic personality, two were psychoneurotics, three were epileptics, 12 were cases of mental disease, one individual had an endocrine disorder and one was undiagnosed.

Twenty-five failed to get beyond the fourth grade in the public schools (only five of these individuals were "normal"). Fifty-two dropped out between the fifth and eighth grades, 17 went to High School, six never went to school. Our public schools, in a measure, failed to equip these individuals for life. When a man's business is running poorly, he does not scrap it, thus wasting all he has already put into it. He studies the situation carefully, and as often as not saves it by increasing his investment.

Sixty-three of these individuals were handicapped by personality difficulties and character defects. Twenty-four of the 100 cases gave a history of behavior difficulties and conduct disorders, in which fighting and drinking predominated. A record of having come into conflict with the law, of being arrested, was obtained in the case of 36 individuals, 15 of whom were repeated offenders.

Ninety of these cases of unemployment were unskilled workers. Is it pertinent to ask here what our educational system did for the 69 individuals that passed through the fifth grade and went beyond?

THE CITY INFIRMARY

This institution is located at Hartwell, Ohio, about 40 minutes from Cincinnati by street car. The institution is located on a farm of 167 acres, of

which only about 60 acres are tillable, the rest being grazing land. The soil is poor.

BUILDINGS

The main buildings are very old, and were erected originally for use as a convent. The construction of these buildings is of massive stone and masonry throughout. They are poorly adapted for the use to which they are being put. The floors are very bad, and the plumbing is totally inadequate. There have been no repairs worth mentioning made on the buildings since they were used as a convent more than 50 years ago.

The institution has a capacity of 800 or 900 inmates. Only between 400 and 500, however, are at present in it. It exists, as a custodial institution, for old men and women—residents of Cincinnati. Applications for admissions are made to the Department of Public Welfare of the City of Cincinnati. From January, 1920 to December 31, 1920, there were 114 admissions—87 men and 27 women.

There are 11 buildings in all. The principal buildings, however, are the hospital, the building for negroes, main building and the chapel. The latter is idle six days a week. There are four wards for men and three for women, two hospital wards for men and three hospital wards for women. The wards are made up of separate rooms, averaging 3 inmates in a room. The rooms are very small and poorly ventilated and there is no plumbing in any of them.

The men are segregated from the women and the blacks and whites are separated. There is a large number of insane persons but there is only a rough segregation of these cases. The untidy cases are kept in separate rooms—two and three in a room.

FOOD

The food is very poor. Breakfast consists of coffee, bread and molasses. Dinner consists of soup or tea, boiled beef, potatoes and another vegetable and bread. Supper consists of tea, bread and molasses. The food that is given the attendants is of not much better quality. The hospital has milk, butter and eggs every day.

MEDICAL ATTENTION

The only medical attention is furnished by the Cincinnati General Hospital. Regular visits are made by physicians from the Hospital who see cases that have requested medical attention. There is no routine medical inspection, either at time of admittance or during stay in institution. The institution, housing as it does, old people suffering from many types of chronic diseases, has inadequate medical service.

SUMMARY

In its present state of repair, this institution is a very poor one. The inmates are on the whole, kindly treated, but the equipment is so wretchedly inadequate, and the food so poor that the atmosphere in the place is very depressing. The institution at the time of inspection was only about half full, but without further repairs, it is difficult to see how it can be made a usable institution for housing dependents.

HAMILTON COUNTY HOME

This institution is located at Carthage, Ohio, and serves as a home for dependent old people of Hamilton county. There are six buildings in all, but most of the inmates are housed in the main building, which is a three-story brick structure. The building is in a good state of repair and is adequate for the purpose. It is located on a farm of 100 acres of sandy soil with good drainage. At the time of inspection, there were 166 inmates—48 men and 118 women. There had been admitted during the year from February, 1920, to February, 1921, 56 individuals—44 men and 12 women.

FOOD

The food is very good. Breakfast consists of rolled oats, coffee with milk, bread and molasses. Dinner consists of vegetable soup, potatoes and beef, sliced tomatoes or other vegetables. Supper consists of prunes, bread, butter and tea. The hospital has milk, butter, and eggs twice a day. There is a house doctor who is paid by the institution for his services. There are two hospital rooms for males and one large ward. The women are cared for in their rooms when sick. The hospital equipment is fair. Serious cases are sent to the City Hospital.

SUMMARY

This institution is clean and well kept. It does not have the earmarks of the usual county home. Inmates seem well cared for and fond of the superintendent and matron, who treat them most humanely. There are no routine physical examinations, blood tests, or medical records. There is no effort made at evaluating the mental status of the inmates. There are a number of insane housed in the home.

There were 162 persons studied at the Hamilton County Home and 394 at the City Infirmary.

The problems presented by the City Infirmary and the Hamilton County Home are somewhat different from those of the other organizations. They represent the lowest end of the scale, the chronic dependents—the mentally and physically diseased and defective and the very aged. The range of ages in the City Infirmary was from 26 to 110, with only 10 under 40 and the vast majority between 55 and 85. In the Hamilton County Home, the median age was 70 to 74, the vast majority lying between the ages of 60 and 80. Only six in the Hamilton County Home and 19 in the City Infirmary were in good physical condition; in the former 69 were in such poor or bad physical condition as to be in need of urgent medical treatment, while in the latter 222 were in a similar physical condition.

The percentage of native-born was smaller in these two groups than in any of the preceding, 93 out of 162 in the Hamilton County Home being native born and 50 of native-born parents, while 246 out of 394 in the City Infirmary were native born, but only 66 of native parentage.

All the members of both groups are at present wholly dependent, 27 of the Hamilton County Home and 51 of the City Infirmary having become so within the year. In the former institution, 48 have been dependent from two to five years, 39 from six to nine years, 38 from 10 to 20 years, and 10 over 20 years; in the latter the situation is as bad, 101 having been dependent from two to five years, 101 from six to nine years, 88 from ten to twenty years, and 29 twenty years and over. (Record not obtained on remaining cases).

Sixty-eight of the 162 in the Hamilton County Home had been married (15 of whom had separated or were divorced), and 207 of the 395 in the City Infirmary had been married (27 of whom were separated or divorced.) The number widowed in both institutions is extremely high—47 in the Hamilton County Home and 151 in the City Infirmary.

As regards the schooling of these individuals, in the Hamilton County Home, 16 had never been to school at all. All of these individuals showed some mental abnormality. Fifty-five had dropped out by the end of the fourth grade and 41 more by the eighth grade; five had been to high school and four to college. In the City Infirmary group, 40 had had no schooling at all (five of whom were normal) 123 left before the fifth grade, 102 between the fifth and eighth grade, eight had gone to high school and four to college.

Thirty-five of the inmates of the Hamilton County Home, and 126 of those at the City Infirmary gave a history of past behavior difficulties, such as fighting, sex promiscuity, alcoholism, etc. Thirty-four of the former group had been arrested (16 were repeaters), while 112 of the latter had been arrested (63 of these were repeaters.)

In the Hamilton County Home, there were 17 skilled workers, and 129 unskilled. Six had never done any work at all. In the City Infirmary there

were 32 skilled workers, 326 unskilled, and one had never worked. The remainder were unable to give their industrial history.

The mental diagnosis of the group at the Hamilton County Home showed that of the 154 white, only four and five-tenths per cent were diagnosed as "normal," five and two-tenths per cent as subnormal, five and two-tenths per cent as borderline mental defectives, nine and one-tenth per cent as feeble-minded, two and six-tenths per cent as psychopathic personalities, six-tenths per cent as psychoneurotics, one and nine-tenths per cent as epileptics, 58.4 per cent as cases of mental disease, 10.4 per cent as case of senility without deterioration, and one and nine-tenths per cent were undiagnosed; of the eight negro inmates, two were classified as feeble-minded and six were suffering from mental disease.

The mental diagnoses of the group at the Hamilton County Home showed that 20.3 per cent were classified as "normal," eight and five-tenths per cent as subnormal, four and five-tenths per cent as borderline mental defectives, 11 per cent as feeble-minded, five and one-tenth per cent as cases of psychopathic personality, eight-tenths per cent as psychoneurotic, 45.1 per cent as suffering from mental disease, three-tenths per cent from endocrine disorders, and four and five-tenths were undiagnosed; of the 39 negroes, three were "normal," two subnormal, three borderline mental defectives, six feeble-minded, one psychopathic personality and twenty-four suffering from mental disease.

From 60 to 70 per cent of the inmates of these two institutions were suffering from either mental disease, epilepsy, or feeble-mindedness. If this data shows anything it is that the most outstanding problems presented by these persons is one of mental disorder—a medical problem. These persons are primarily sick persons, needing medical treatment as well as good food, comfortable surroundings, and kindly care.

The tendency more and more today is to convert our almshouses, county, and city homes into real hospitals, equipped as such and manned by proper medical personnel.

SUMMARY OF DEPENDENCY STUDY

JUVENILE DEPENDENCY

Of 359 children studied in connection with the Children's Home, the General Protestant Orphanage, the Bureau of Catholic Charities, and the boarding homes, the vast majority were native born; only two negro children were examined. The children ranged in age from five to 18 years. The median chronological age was 10.3 years.

Thirty-two and three-tenths per cent were retarded in school from two to eight years. Seventy-seven and four-tenths per cent were considered close enough to the city norm to be classed as average in intelligence.

Sixty-eight and eight-tenths per cent were classified as "normal." This is quite in contrast to our group of delinquent children, in which approximately two-thirds were classified as suffering from subnormal intelligence, mental defect, psychopathic personality, epilepsy, etc.

Approximately 24 per cent of these children showed delinquent tendencies, in that they exhibited conduct disorders, such as, lying, stealing, fighting, bad sex practices, etc.

Sixty-four and six-tenths per cent of these dependent children showed some physical disease or defect or evidence of physical ill health.

ADULT DEPENDENCY

Adult dependency presents quite a different picture in that the majority of the individuals studied were mentally or physically sick and handicapped persons.

BUREAU OF CATHOLIC CHARITIES

Of 61 cases studied, 30 were men and 31 were women, 41 were native-born (18 of native-born parents) while the 20 foreign born came from nine different

countries. The physical condition of 16 was such as to call urgently for medical attention. Thirty-six were married, but 20 of these were widowed, divorced, or separated.

Seventy-five per cent of these persons were either subnormal in intelligence, mentally defective, or suffering from epilepsy, psychopathic personality or mental disease.

Fifty-nine persons were unskilled workers; only ten gave a history of having in the past had regular employment.

FIFTY DEPENDENT JEWISH FAMILIES

These families composed 212 individuals, ranging in age from six to 68 years.

One hundred and eighty-one were suffering from physical defects or disease, or showed disturbances of physical health.

The average mental age was less than 11 years.

Sixty-two and three-tenths per cent suffered from character defects or personality difficulties.

Fifty per cent were classified as being either subnormal in intelligence, of borderline mental defect, feeble-minded, psychopathic or suffering from epilepsy, endocrine disorders, mental disease or psychoneurosis.

Twenty-five were found to be totally illiterate, and 30 had never entered any kind of a school.

Behavior difficulties—misconduct—appeared in 28 cases.

More than half were American born.

ASSOCIATED CHARITIES

122 Relief Cases

One hundred and twenty-two relief cases were studied. One hundred and twenty were native born; 98 of native-born parents.

Thirty-six were in such poor physical condition as to be in urgent need of medical attention.

One hundred and four had been married; 21 were widowed and 16 separated or divorced.

The median mental age was 11 years; they were all adults.

Approximately 72 per cent were classified as either subnormal in intelligence, mentally defective, psychopathic personality or suffering from endocrine disorders or from mental disease.

Twenty-two persons had been arrested.

None of those classed as cases of borderline mental defect, feeble-minded, psychoneurotic, epilepsy or mental disease had ever been regularly employed in their lives.

Only one out of the 36 in poor physical condition had been regularly employed.

ASSOCIATED CHARITIES

100 Unemployment Cases

Ninety-two were men and eight were women; 83 were white and 17 were negroes; 94 were native born, 68 of native-born parents.

Thirty-five had become dependent during the last year and 42 were non-dependent.

Thirty-eight were married.

The median mental age for the group was 12 years; they were all adults.

Seventy-one were classified as either sub-normal in intelligence, mentally defective, psychopathic personality or suffering from epilepsy, endocrine disorder, or mental disease.

Ninety were unskilled workers.

THE CITY INFIRMARY

394 Cases

The range of ages was from 26 to 110 years, with only 10 under 40 years. The vast majority were between 55 and 85 years.

Two hundred and twenty-two of the 394 persons were in such physical condition as to be in urgent need of medical treatment.

Two hundred and forty-six were native born, but only 66 were of native parentage.

One hundred and one have been dependent from two to five years; 101 from six to nine years, 88 from 10 to 20 years, and 29, 20 years and over. (Record not obtained on remaining cases.)

Two hundred and seven of the 394 had been married.

One hundred and twenty-six gave a history of past behavior difficulties, such as fighting, sex promiscuity, alcoholism, etc. One hundred and twelve had been arrested; 63 were repeaters.

Only 32 individuals had been skilled workers.

Only 20.3 per cent of the white inmates were classed as "normal," while of the 39 negroes only three were normal.

HAMILTON COUNTY HOME

162 Cases

The median age was 70 to 74 years. The vast majority were between 60 and 80 years. Only six were in good physical condition.

Ninety-three out of the 162 were native born, 50 of native-born parents.

Sixty-eight had been married, 15 of whom had separated or divorced.

Thirty-five inmates had shown delinquent tendencies.

Seventeen were skilled workers, 129 unskilled, and six had never done any work.

Only four and five-tenths of the whites were classed as of normal mentality; all the rest showed serious mental abnormality. All of the negroes were either feeble-minded or cases of mental disease.

PUBLIC SCHOOL CHILDREN

This survey included a study of 4,326 public school children in Cincinnati. The idea was to get a picture of the average public school child. In order to do this, certain typical schools were chosen, and every child in these schools was given an examination. The schools selected by Mrs. Helen Woolley, Director of the Vocation Bureau, at the time that the survey was inaugurated, were as follows: Washington, Peaslee, Washburn, Twenty-third District, Avondale.

The survey included a careful physical examination of each child. This was done by the City Department of Health. Great appreciation and commendation is due to the officials of the Health Department, for the splendid piece of work they have done in connection with this phase of the survey. The size of the report makes it impossible to present properly all of this valuable material.

The mental examination of the children was conducted in the following way: an intelligence rating was secured by means of group tests, except in the case of the youngest children, who were all given individual, psychological examinations. A personality evaluation was made through a history gathered from the child and the teacher and through social investigations. The behavior of the child was studied in the same way; while an educational rating was made from the school records already at hand, and through conferences with teachers.

After gathering this routine data on each child, every case history was then carefully gone over and all children showing conduct disorders, personality

difficulties, intellectual retardation, school retardation, speech defects, etc., were given intensive psychiatric and psychological examinations.

ANALYSIS OF DATA GATHERED

Of the 4,326 children studied 4,155 were native born. The fathers of 3,142 children were American born, the mothers of 3,299 were American born; while in the case of 2,945, both parents were American born. In the case of 84 children information was not obtained. There were 4,055 white children, and 271 colored.

There are two ways of considering the problem of school efficiency; one from the standpoint of the product, i. e., is the school doing all it can to develop each child to the fullest extent of its possibilities; the other from the standpoint of administrative efficiency, i. e., is the school being most economically run? The two points of view are inextricably bound up in each other; any investment, no matter how small, in a poor school system is money wasted; and the taxpayers will have to pay out later in charities, dependent and feeble-minded institutions, and penitentiaries what they so shortsightedly hold back now. On the other hand, almost any amount of money expended upon a well run school system will not only yield enormous returns in an efficient citizenry, but will, in the long run actually save money.

Take, for example, the following table:

TABLE 30

Number of Grades Repeated Classified With Reference to Mental Diagnosis

Diagnosis	Total	None	One	Two	Three	Four or More	Un-Total as- Re-peat-ers	t'n'd. ters
Normal	3003	2234	642	58	5	2	62	707
Dull normal.....	741	181	387	134	18	1	20	540
Subnormal	208	25	90	71	17	3	2	181
Borderline mental defect.....	86	10	33	27	11	1	4	72
Mental defect	86	8	22	28	16	10	2	76
Pre-psychopathic	69	29	20	13	3	..	4	36
Psychopathic personality.....	47	11	16	15	1	2	2	34
Nervous and neurotic.....	36	21	6	6	1	..	2	13
Question of epilepsy.....	3	1	2	..	..	..	..	2
Epilepsy	9	4	3	1	1	..	..	5
Endocrine disorder	29	13	11	2	3	..	..	16
Unascertained	9	6	3	..	..	..	..	3
TOTAL	4326	2543	1235	355	76	19	98	1685

We find that 1,685 children, or 39 per cent of the total number, repeated over 2,250 grades. Figuring the approximate average cost per pupil per grade at \$63.62, we get a total of \$143,000 expended on repetition of grades alone.

And how does this react upon the school children themselves? The repeaters, if normal—and 707 of them were—going over the same work a second or third time lose interest not only in their studies, but in the school as a whole. Inattentiveness and misbehavior develop, and, combined with a bad attitude toward the school, increases the difficulties of the teachers manifold. Where the repeaters are subnormal, they remain in the same grade year after year, absorbing nothing themselves and acting as a drag on the progress of their more normal classmates. The element of discouragement due to a failure to make grades has an immense effect on the personality of the child.

Table 31 shows more specifically the effect of this repetition on the normal child who makes his grade each year.

TABLE 31

Chronological Age of Children Classified According to Grade Attained in School

Grade Attained	Total	5	6	7	8	9	10	11	12	13	14	15	16	17
Kindergarten	2	...	...	2	...	...	...	...	...	...	...	...	...	...
First grade.....	683	28	368	213	51	13	2	4	2	1	...	1	...	...
Second grade.....	609	...	20	298	187	64	26	7	3	4	...	...	...	...
Third grade.....	549	...	...	31	241	161	76	24	10	4	...	2	...	...
Fourth grade.....	601	...	...	1	49	221	172	103	33	17	3	2	...	...
Fifth grade.....	546	...	...	1	1	30	173	176	98	45	19	2	1	...
Sixth grade.....	531	...	...	...	...	4	42	159	138	108	57	21	2	...
Seventh Grade.....	324	...	...	...	...	1	...	16	119	103	62	22	1	...
Eighth Grade.....	331	...	...	...	...	...	...	3	25	127	102	62	11	1
Vocational, Pre-vocational, Household Arts and Commercial Classes														
Sixth grade.....	38	...	...	...	...	...	...	...	...	7	16	12	3	...
Seventh grade.....	45	...	...	...	...	...	...	...	...	14	14	14	3	...
Eighth grade.....	34	...	...	...	...	...	...	...	...	4	14	11	5	...
Ninth grade.....	19	...	...	...	...	...	...	...	...	...	1	16	2	...
Observation and Oppor- tunity classes.....	14	...	...	2	4	8	...	...	...	...	...	...	...	...
TOTAL	4326	28	388	548	533	502	491	492	427	434	288	165	28	1

The range of chronological ages in each grade shows a variation of from six to eight years. In the first grade we have children of five and children of 13 in the same classroom. In the fifth grade the situation is even worse, the range of ages extending from seven to 16. This is pernicious, regardless of the mentality of the children. More than mental age must be taken into consideration in grouping boys and girls. A child of 10 and a child of 15 may have the same mental age, but physiologically and emotionally they are entirely different. The influence of a backward boy or girl of 15 on a normal one of 10 is likely to be anything but good as far as habits and general behavior are concerned.

Table 32 brings out another point in regard to this indiscriminate grouping of children:

TABLE 32

Retardation and Advancement of School Children With Reference to Grade Attained

Grades	Total	Retarded					At Age	Advanced				Total Re- tarded	Total Ad- v'c'd.
		5 or more	4	3	2	1		Years		3			
First	683	8	2	13	51	213	368	28	...	...	...	287	28
Second	609	7	7	26	64	187	298	20	...	...	...	291	20
Third	549	6	10	24	76	161	241	31	...	...	...	277	31
Fourth	601	2	3	17	33	103	172	221	49	1	158	271	
Fifth	546	1	2	19	45	103	176	168	30	2	170	200	
Sixth	531	...	2	21	57	108	138	159	42	4	188	205	
Seventh	324	...	...	1	22	62	103	119	16	1	85	136	
Eighth	331	...	...	1	11	62	102	127	25	3	74	155	
TOTAL ..	4174	24	26	122	359	999	1598	873	162	11	1530	1046	

Here we note a total of 1,046, or 25.1 per cent advanced for their ages. These bright children suffer in several ways besides those mentioned above. Their classmates offer little stimulus to them mentally, and the work, held back for the slower ones, is often so easy for them that they become lazy and superficial and fall far short of their possibilities. Because of this incomplete claiming of their attention, they constitute no mean percentage of our behavior problems.

TABLE 33

Chronological Age of Children Classified With Reference to Test Age*

Test Age	Total	5	6	7	8	9	10	11	12	13	14	15	16	17
IV Years.....	17	10	5	2	...	...	...	...	...	...	...	...	...	...
V ".....	97	32	49	12	3	1	...	...	...	...	...	...	...	...
VI ".....	292	15	137	108	19	11	2	...	...	...	...	...	...	...
VII ".....	377	3	54	173	93	29	13	3	5	2	...	2	...	...
VIII ".....	449	...	11	60	148	105	58	32	17	8	6	4	...	...
IX ".....	477	...	2	20	98	109	88	67	34	34	20	4	1	...
X ".....	449	...	1	6	57	98	88	73	44	35	27	15	5	...
XI ".....	338	...	...	...	5	34	56	65	61	50	44	19	4	...
XII ".....	300	...	...	...	2	15	43	59	70	51	36	20	4	...
XIII ".....	191	...	...	1	1	3	23	24	51	37	33	17	1	...
XIV ".....	116	...	...	...	...	4	11	13	28	33	15	9	2	1
XV ".....	62	...	...	...	...	1	2	7	20	15	12	5	...	...
XVI ".....	46	...	...	...	...	1	1	2	16	9	11	5	1	...
XVII ".....	13	...	...	...	...	...	...	3	6	4	...	...	...	...
XVIII ".....	4	...	...	...	...	...	...	1	3	...	...	...	...	...
XIX ".....	1	...	...	...	...	...	...	1	...	...	...	...	...	...
Unascertained	1097	13	186	193	144	144	119	121	76	58	29	13	1	...
TOTAL	4326	73	445	575	570	555	504	471	431	336	233	113	19	1

Table 34 shows the mental retardation and advancement in terms of years.

TABLE 34

MENTAL RETARDATION AND ADVANCEMENT

At age.....	880
Retarded 1 year	680
" 2 years	339
" 3 years	196
" 4 years	107
" 5 years	52
" Over five years....	24
TOTAL RETARDED.....	1398
Advanced 1 year	541
" 2 years	246
" 3 years	93
" 4 years	44
" Over 4 years.....	27
TOTAL ADVANCED....	951

Approximately one-fourth of the children were at age in the sense of having the same mental and chronological ages; and this does not mean merely difference in mental age, but difference in interests, attitude, aptitude, inclination, etc. A boy of 14, five years retarded, is certainly not the equal of a bright, intelligent boy of nine years at age.

*NOTE: Of the 3,229 children whose test ages were determined, 880 or 27.3 per cent had test ages which coincided with their chronological ages; 951 or 29.5 per cent were over age mentally, and the remaining 1398 or 43.3 per cent were retarded from one to eight years.

TABLE 35
MENTAL DIAGNOSIS

Diagnosis	TOTAL		WHITE		COLORED	
	Number	Per Cent	Number	Per Cent	Number	Per Cent
Normal	3003	69.4	2894	71.4	109	40.2
Dull normal	741	17.1	667	16.4	74	27.3
Subnormal	208	4.8	167	4.1	41	15.1
Borderline mental defect...	86	2.0	68	1.7	18	6.6
Mental defect	86	2.0	66	1.6	20	7.4
Pre-psychopathic	69	1.6	66	1.6	3	1.1
Psychopathic personality ..	47	1.1	45	1.1	2	0.7
Nervous and neurotic	36	0.8	35	0.9	1	0.4
Question of epilepsy.....	3	0.1	2	0.0	1	0.4
Epilepsy	9	0.2	8	0.2	1	0.4
Endocrine disorder	29	0.7	29	0.7	..	..
Unascertained	9	0.2	8	0.2	1	0.4
TOTAL	4326	100.0	4055	100.0	271	100.0

This table shows that two per cent of the children were classified as mental defectives (one and six-tenths per cent of the whites and seven and four-tenths per cent of the colored children were considered mentally defective); two per cent were classified as cases of borderline mental defect (one and seven-tenths per cent of the whites and six and six-tenths per cent of the colored); three and five-tenths per cent of the total number of children were diagnosed as either nervous, pre-psychopathic or psychopathic; four and eight-tenths per cent were diagnosed as subnormal (four and one-tenth per cent of the whites and 15.1 per cent of the colored); two-tenths per cent were classified as epileptics; and seven-tenths were classified as cases of endocrine disorder.

MENTAL CONDITIONS FOUND AMONG SCHOOL CHILDREN

There are five distinct types of problem children to which we wish to call special attention in this phase of our report: The retarded child, the mental defective, the nervous and psychopathic child, the epileptic child, and the child suffering from speech defect.

THE RETARDED CHILD

The dull and subnormal child, whose mental backwardness is not of such a degree as to require special class training with the feeble-minded, but who, because of his retarded mentality, is in need of more specialized training than he can secure in the regular grade, is the type referred to here. It is this type of pupil for whom the ungraded classes were created.

In the great majority of these children, the chances for normal development and mental health are probably good, provided early and proper diagnosis is made and suitable treatment and training are instituted.

Every backward child should receive a complete physical and mental examination and home investigation. Proper study and treatment of the causes underlying the mental backwardness of these children frequently serve to return them to the regular grades.

In life the mental equipment of the backward child is not quite sufficient to enable him to measure up to the complex demands made upon him, and a large proportion of the failures and breakdowns are drawn from this group. And yet we find among the retarded children the same ambition and the same striving for success as the more normally endowed show.

The particular difficulties and varied problems presented by these individuals are not to be solved by merely determining their intellectual rating and I. Q. We must know the causes of the mental retardation and not rest satis-

fied with merely identifying and measuring the degree of backwardness. Each case is an individual problem, presenting varied medical, psychological, sociological and pedagogical angles.

Four and eight-tenths per cent of these children were diagnosed subnormal, and 17.1 per cent were called dull normal.

THE NERVOUS AND PSYCHOPATHIC CHILD

This type of child is neither insane nor feeble-minded. He may have good intelligence and would often be classed on purely an intellectual basis as normal, yet these children furnish the most difficult problems to be met with in the public schools, and in later life are one of the largest sources of delinquency and insanity.

These children show outstanding handicaps of personality that mark them as being different from other children. Their adaptive difficulties are the expression of mental attitudes, mental trends and twists which constitute a very marked departure from normal mental health.

Various types of psychopathic children are to be seen in the public schools, the very thin, under-nourished, overactive, restless, neurotic emotional, violent tempered child; the apathetic, weak-willed, physically inert, sluggish, over-suggestible, inadequate child; the egocentric, selfish, egoistic, unappreciative, cruel, ungrateful, individualistic child; the shut-in, self-centered unapproachable child; the timid, hypersensitive child with feelings of inferiority, and many other types with psychopathic traits that seriously handicap them in adapting themselves to their environment.

We shall not endeavor to go into the many causes for these conditions. They are varied and are found within the individual himself (in disorders of the physical organism, in mental conflicts, etc.), or are environmental in origin (factors in the home, in the school, at work and at play.) We do wish to emphasize, however, the importance of early recognition of these psychopathic conditions among school children. Daily it is becoming more and more apparent that many adult breakdowns are directly traceable to child life. A psychopathic personality forms the very richest soil possible for insanity in adolescence and in adult life, and is a very large factor in juvenile delinquency.

With our changing attitude towards insanity and crime, with our present realization that these conditions often show their beginnings in childhood and are, in a large measure, preventable, there can be no excuse for our neglect to deal intelligently and understandingly with psychopathic children in the public schools. The examination of these children should be conducted in a clinic equipped to deal with both mental and physical issues. The great importance of a searching physical investigation is now made evident from the frequency with which disorders of the ductless glands, ovaries, testicles, thyroid, etc., are encountered. These children should receive a thorough-going study from a psychiatric as well as a psychological point of view. The question of psychotic and psycho-neurotic tendencies, the child's personality make-up, his abilities and disabilities should all receive careful consideration. A course of treatment for each psychopathic child should be mapped out only after such a comprehensive examination has been made.

Three and five-tenths per cent of the public school children examined came within this particular grouping. If this percentage is borne out among the entire population of public school children, and we believe it is, then it can be seen how important is this problem; how urgent is the need of adequate clinical facilities for dealing with the problems these children present if we are to prevent behavior difficulties later on.

THE MENTALLY DEFECTIVE CHILD

Two per cent of the public school children studied were classified as mentally defective, while an additional two per cent were diagnosed as cases of borderline mental defect.

The import of these figures cannot be ignored. There is no more important problem for the school authorities of Cincinnati than that of mental

deficiency. The feeble-minded child is not only a misfit in the school, a burden to the teacher, and a hindrance to the other pupils in the school, but later on in life the sad combination of his childish mind and adult years brings him into conflict with society's customs and laws.

The fact that this is an hereditary condition, and the fact that mental defectives, for the most part, if untrained, become dependents and delinquents, while if properly trained along industrial and vocational lines they may be, in a large measure, made self-supporting, puts a serious responsibility on the shoulders of public school officials.

As it has been brought out in our previous discussion, feeble-mindedness is one of the large factors underlying pauperism and dependency, and is important to consider in connection with delinquency. These feeble-minded individuals are costing the state vast sums of money and are reproducing their kind in large numbers without hindrance and sending them out into the community. If we are to do anything to prevent these conditions, the time to accomplish this is during the early years of the school career. The keynote to the solution of the problem of feeble-mindedness is early and intensive industrial and vocational training, during developmental years, at a time when the feeble-minded child can profit by what we do for him. This can be accomplished only by state-wide organization of special classes for all defective children in the public schools, and by the equipment of the state institutions for the feeble-minded with educational facilities to meet the problems of those children who cannot be trained in the public schools, or are delinquent and dependent defectives.

The present institutional facilities in this state for the care of feeble-minded children are inadequate. A large number of the mentally defective children in the community will, of course, require a period of institutional care and intensive training. In the meantime and for many years to come, the only training the great majority will ever receive will be in the public schools of the state. This much must be borne in mind; mental defectives are trainable, if trained along proper lines, to work with their hands, to do something useful at which they can earn a living.

Nothing worth while can ever be accomplished by academic training of feeble-minded children. The vast financial burden and social mischief for which these individuals are responsible are, in a large measure preventable, providing we train defective children along industrial and occupational lines in the public schools and in the state institutions, and providing we give them that kindly supervision they are in need of when they leave the public schools, and providing we early send to the state institutions those defective children who threaten to become delinquent and dependent.

THE EPILEPTIC CHILD

The frequency of this condition in childhood is not definitely known owing to the difficulties of making a diagnosis. In a survey of this kind only the gross cases with definite histories of seizures and clinical evidence of epilepsy could be included. In this particular survey, two-tenths per cent were diagnosed as suffering from epilepsy. This is practically the same as findings in other surveys, particularly Wisconsin and South Carolina. Approximately two out of every thousand public school children are suffering from epilepsy. Some of these children are feeble-minded and yet, because of their epileptic attacks, cannot be handled in special classes with mental defectives. Many of them, before repeated seizures have produced mental dullness, are of normal intelligence and are capable of keeping up with the regular grade work. But it is necessary to exclude them from the grades for the sake of other children as well as for the welfare of the epileptics themselves. Nothing is more distressing for the other children than to witness the severe convulsions from which these children suffer. As a result, the epileptic child is, in a large measure, excluded from the public schools, and he grows up in life having to face a double handicap—not only the affliction of his disease, but the additional burden of illiteracy. Special provision for the teaching of these children should be made. Many of them may be saved for useful work in life, for some are exceptionally

TABLE 36
Speech Disorders of Children Classified With Reference to Mental Diagnosis

Diagnosis	Total	None	Lisping	Stammering	Stuttering	Letter substitution	Oral inactivity	Nasal tone	Hoarse and thick voice	Monotonous or hoarse voice	Thick	Slow speech	High pitched voice	Faulty articulation	Slight accent	Hesitancy	Phonetic difficulty	Indistinct speech	Stuttering	Tongue-tied	Unclassified speech defect	Unascertained
Normal	3003	2792	48	6	20	27	3	5	2	1	2	.1	..	..	.1	4	8	5	1	.1	9	70
Dull normal	741	662	13	4	8	17	..	6	1	..	2	..	..	..	.1	1	..	1	..	..	2	21
Subnormal	208	172	5	3	2	8	..	..	1	..	2	..	..	.1	..	2	..	1	..	..	..	10
Borderline mental defect	86	71	..	..	1	5	..	..	1	..	2	..	..	..	..	1	..	..	..	..	..	4
Mental defect	86	72	1	..	1	2	..	..	1	..	1	..	..	..	..	1	..	..	..	..	..	3
Pre-psychopathic	69	59	1	1	3	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	3
Psychopathic personality	47	43	1	1	..	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	3
Nervous and Neurotic	36	28	2	..	..	..	..	..	..	..	1	..	..	..	..	1	..	..	..	..	..	4
Question of epilepsy	3	3	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Epilepsy	9	8	..	..	1	1	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	2
Endocrine disorder	29	24	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
Unascertained	9	8	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	1
TOTAL	4326	3942	71	14	36	60	3	11	7	1	10	1	2	1	1	11	9	10	5	1	11	119

capable individuals. It is believed that, through the careful training of these children from childhood, much of the personality defect, as well as the danger of intellectual deterioration may, in a measure, be prevented.

SPEECH DEFECT

Six and one-tenth per cent of the school children examined were found to be suffering from some form of speech defect. We are here dealing with children who, in the great majority of instances, have good intelligence and learning capacity, and who are capable, if given the right help at the right time, of becoming successful men and women, but if their handicap is not early recognized and properly treated, they may become social failures because of their inability to meet people and situations in life. The constant embarrassment and shame resulting from stammering or stuttering or some other speech difficulty, brings about a consciousness of inferiority that destroys the very foundation of self-confidence and self-assurance. Table 36 shows the frequency of speech disorders among the school children studied.

The chief problem presented by these children is one of emotional instability and personality difficulties. These conditions are largely modifiable, but if not properly treated at an early period, they remain throughout life. Speech classes should be organized only under the direction of highly trained speech teachers. These children should not need to be removed from the grades, but at some period during each day they should be excused from their regular work for a conference and for special treatment by the speech teacher.

PERSONALITY DIFFICULTIES

We may regard the personality difficulties as the covert mechanisms that sooner or later issue in overt behavior. These difficulties are found in mental attitude and in mental adjustments. Table 37 shows the frequency of personality handicaps and their relation to the mental diagnosis.

TABLE 37

Personality Types of Children Classified According to Mental Diagnosis

Diagnosis	Total	No Outstanding Difficulty	Emotional	Egocentric	Inadequate	Paranoid	Shut-in	Others	More than one type	Unascertained
Normal	3003	2365	396	66	71	1	22	4	20	58
Dull normal.....	741	436	127	21	117	..	8	1	10	21
Subnormal	208	78	45	15	49	1	4	..	11	5
Borderline mental defect...	86	27	20	5	31	..	..	..	..	3
Mental defect	86	22	18	4	34	..	1	1	2	4
Pre-psychopathic	69	1	43	8	2	..	1	1	11	2
Psychopathic personality..	47	..	23	9	2	..	3	..	8	2
Nervous and neurotic.....	36	5	28	..	..	..	..	..	2	1
Question of Epilepsy.....	3	2	1	..	..	..	..	..	..	..
Epilepsy	9	3	2	..	3	..	..	..	1	..
Endocrine disorder.....	29	5	17	..	3	..	..	..	2	2
Unascertained	9	6	..	..	1	..	..	..	..	2
TOTAL	4326	2950	720	128	313	2	39	7	67	100

It is interesting to note that 19.3 per cent of the children classed as normal, 60.1 per cent of the children classed as subnormal, 65.1 per cent in the borderline mental defect group, 69.8 per cent of the feeble-minded, and all of the cases of psychopathic personality showed character defects and personality handicaps. This certainly points to an explanation, in a measure at least, of the fact that defective and psychopathic children are liable later on in life to

provide us with such a large percentage of cases of dependency and delinquency.

One of the things that stand out in this table is the relatively large percentage of inadequate personalities found in the dull, subnormal and feeble-minded children.

CONDUCT DISORDERS

One of the most serious conditions threatening childhood is the danger of entering upon criminal careers. Disorders of conduct that lead to delinquency show themselves very early in the school period. Such socially unacceptable behavior as persistent lying and stealing, cruelty, fighting, bad sex practices, and truancy, are not uncommonly met with in the public schools. If misunderstood and unintelligently handled, these conditions may eventually develop into more serious departures from normal behavior, and sooner or later the individual is hailed into the Juvenile Court.

As we have previously pointed out, the majority of all criminal careers have their beginnings in childhood. The realization of this fact is causing public authorities and those interested in the prevention of crime to advocate the importance of centering all constructive social work on those forces that train children for a wholesome and socialized adult life.

Six and two-tenths per cent of the children in this study showed such outstanding disorders of conduct as clearly to depart from average normal behavior. It is not surprising to find that while only three and three-tenths per cent of the normal children had conduct disorders, 13.9 per cent of the subnormal children, 14 per cent of the feeble-minded children and 43.4 per cent of the nervous and psychopathic children had repeatedly exhibited socially unacceptable behavior. This certainly shows where our future problem of delinquency lies.

It may be remarked that practically all of the children exhibiting behavior difficulties were found to be handicapped in the way of character traits and personality make-up. The solution of the problems presented by these children will never be accomplished by grouping them into types and giving them classifications. Each and every individual is a complex problem unto himself, to be unravelled and adjusted only after the most painstaking and scientific inquiry. It is here that a well-rounded clinical study, plus the help of the visiting teacher can be of incalculable service, not only to the school authorities in adjusting the child to the curriculum of the school, but—and this is of greater importance—in setting in motion machinery looking to the normal adjustment of the child to life.

PHYSICAL CONDITION OF SCHOOL CHILDREN

No mental hygiene survey is complete without a physical examination of the children studied. Mental health and physical health are so essentially inter-dependent that they cannot be considered separately. Many cases of mental dullness are undoubtedly physical in origin and recoverable. The influence of fatigue, physical illness, and poor nutrition in causing psychopathic conditions is now well known. The physical make-up of the individual is probably the foundation of his personality.

The urgent need of clinical facilities, not only for the diagnosis, treatment, and prevention of conditions that affect the mental health of public-school children, but for the recognition of gross physical conditions, which are undoubtedly often causative factors of mental ill health and mental maladjustment, and are the forerunners of grave physical diseases in adult life, is now being generally stressed.

Table 38 shows the physical condition of these children.

TABLE 38
Somatic Diseases and Defects of Children Classified With Reference to Mental Diagnosis

Diagnosis	Total	Teeth defects	Defective tonsils	Adenoids	Glandular defects	Eye and vision defects	Ear and hearing defects	Nose and throat defects	Goitre and thyroid	Malnutrition	Anemia	Heart trouble	Over-weight	Under-weight	Pre-tuberculous	Spinal curvature.	Breathing defects	Bronchitis	Hernia	Lung conditions	Others	None reported
Normal	3003	604	490	163	177	554	49	18	93	307	159	64	54	201	5	24	59	28	3	3	84	1072
Dull normal	741	189	109	34	31	146	15	3	33	77	46	11	5	59	..	1	30	2	..	..	22	239
Subnormal	208	59	40	21	9	41	6	1	2	23	17	3	1	18	..	4	13	2	..	..	10	50
Borderline mental defect	86	19	9	3	13	22	5	..	6	10	3	2	..	8	..	2	6	..	1	..	4	16
Mental defect	86	17	10	3	4	15	1	..	6	9	3	..	..	6	..	..	6	..	..	..	4	28
Pre-psychopathic	69	14	6	3	3	18	2	..	5	7	4	..	..	5	..	..	2	..	..	..	5	23
Psychopathic personality	47	10	9	1	2	15	3	..	3	1	2	..	..	6	..	..	2	..	..	..	4	12
Nervous and neurotic	36	3	2	1	1	2	..	..	2	3	..	..	..	1	..	..	2	1	..	..	7	9
Question of epilepsy	3	1	..	..	..	2	..	..	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Epilepsy	9	3	..	..	..	2	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Endocrine disorder	29	7	5	..	..	10	1	..	20	..	..	4	7	..	..	..	1	..	..	..	6	4
Unascertained	9	1	2	1	1	..	1	..	2	1	1	1	2	1	..	..	..	..	..	1	1	2
TOTAL	4326	927	692	238	243	834	83	23	193	434	240	89	70	311	5	32	119	34	5	3	153	1458

NOTE: Excluding the 1458 cases in which none were reported, the 4728 somatic diseases and defects enumerated above were distributed among 2868 children.

NOTE: The heading "others" includes such conditions as boils, short fingers, pediculosis, eczema, stoop shoulders, acne, mastoid operation, paralysis in infancy, emuresis, eczema of lips, dizzy spells, gastric disturbance, motor retardation, fractures, square head, elongated head, headaches, chorea, old rickets, history of tuberculosis of bones, sluggish pupils, unequal knee jerks, etc.

Approximately 66 per cent of these public school children were suffering from physical disease or defect or showed evidences of physical ill health.

That there is a relation between physical health and school retardation is evident from the fact that 47.4 per cent of those in poor health had repeated grades.

One out of every four children diagnosed as being either "nervous" or psychopathic was in such poor physical health as to be in urgent need of medical attention. A great many other "nervous" and psychopathic children were in poor physical condition but were not as serious problems. We could state that under all conditions the "nervous" and psychopathic child is chiefly a medical problem. (By this we mean a problem for psychiatric consideration.)

Nine hundred and twenty-seven children had defective teeth. The length of this report will not permit of our going into details regarding this condition. More and more it is becoming evident that defective teeth are the source of many obscure conditions. The public is now becoming well informed as to the serious consequences that may result from neglected teeth. We know that infections of internal organs may insidiously take place and result in serious disturbances of health.

Eight hundred and thirty-four children showed marked eye conditions. In cases of defective vision, it is far more humane, and certainly more economical, to have children's eyes tested and glasses provided than to leave them handicapped and backward as a result of conditions that are remedial. Defective eyes with imperfect vision cause headaches, blurring of sight, and often serious attacks of eye strain, with nausea and dizziness, and lead to serious retardation in school.

Four hundred and thirty-four children were suffering from malnutrition. It is impossible in this report to give the proper consideration to this most important condition, a condition that is so fundamental in maintaining good physical or mental health. The effects of malnutrition on the physical and mental make-up of the child have been shown in this survey to be great. Milk campaigns throughout the country, and general education by public health authorities bearing upon the causes of this condition are now attracting widespread interest.

The great frequency of endocrine disorders, diseases of the ductless glands, heart trouble and other conditions, would certainly justify a special discussion. However we can only emphasize and stress the value of public health inspection and medical examination of public school children. This is certainly fundamental to any well rounded mental hygiene program.

COMPARATIVE STATISTICS ON TWO SCHOOLS

Very naturally the various schools we studied showed some striking differences. Avondale and Washington may be taken as examples.

In the Avondale School 46.4 per cent of the children were advanced in grade for their ages; while only 12.7 per cent were retarded for their age. In the Washington School practically the opposite was found. Only 14.5 per cent were advanced; while 48.4 per cent were retarded. Another interesting finding is that in Avondale four per cent of the children attended irregularly; while at the Washington 18.6 per cent attended irregularly.

The physical condition of the children in the two schools showed different results. Fifty-four and nine-tenths per cent of the children in the Avondale School showed some physical defect or some evidence of physical disease or ill health; while approximately 71 per cent of the children in the Washington School showed physical defects or some physical disease or ill health.

Twenty-six per cent of the children in the Avondale School repeated grades; while 46.6 per cent in the Washington School repeated grades.

Only two-tenths per cent of the children in the Avondale School were mentally defective, while three and one-tenth per cent of the children in the Washington School were mentally defective.

NUMBER OF CHILDREN IN FAMILY

The first community of which any child is a member is the family into which he is born. The success or failure of the relationships established between child and parent, and between the child and his brothers and sisters, will be a determining influence in later successes or failures of social adjustment in the larger groups of which he will be a member. The size of the family—that is, the number of other children within the household with whom the problem child will have to build up definite relationships—is, therefore, a matter of interest.

This study shows that less than one-fourth of the feeble-minded children come from families of as few as one or two children; nearly one-half of the psychopathic children come from families of as few as one or two children. Twenty-five per cent of the mentally defective children came from families where there were more than six children; only eight per cent of the psychopaths came from such large families. The average number of children in the family of the mental defectives was five.

Only two per cent of the mentally defective children had no brothers or sisters; 22 per cent of the psychopaths were only children. Of the 40 psychopathic children, more than half were found to have been either only children for the first five years of their lives, or to have been the youngest child in the family, with at least six years intervening between the births of the last two children.

SOCIAL MALADJUSTMENTS IN THE FAMILY

We have used the term "social maladjustments" in a rather broad sense. We have intended it to include a great variety of conditions, feeble-mindedness, insanity, epilepsy, physical disease—such as tuberculosis, syphilis, etc.—delinquency, alcoholism, family desertion and non-support, extreme cruelty, personality difficulties in members of the family, marked retardation in school, dependency—either partial or complete, etc.

The average number of social maladjustments in the families of the feeble-minded and psychopathic school children was approximately the same, in each case being slightly over three. It is only when the various types of maladjustment are studied separately that more significant facts are revealed.

The families showing insanity, extreme cruelty, or alcoholism, and containing members exhibiting serious personality difficulties, were almost invariably in the cases of the psychopathic school children. The two cases of suicide noted were parents of psychopathic children. Approximately 50 per cent of the families of the psychopathic children studied, have had contact with the social agencies registering in the Confidential Exchange.

Sixty-two per cent of the families of the mentally defective school children have records with some social agency in Cincinnati. In the families of this particular group of defective children investigated, we found 65 mentally defective brothers and sisters, diagnosed as such by the Vocation Bureau. In addition, there were 87 brothers and sisters who were markedly retarded when they were in school and who had been considered subnormal.

Thirty-eight per cent of the families studied were found to have had registrations in agencies dealing with problems of health; 30 per cent had registrations in agencies dealing with dependency; 26 per cent had registrations in agencies dealing with delinquency.

HOME AND NEIGHBORHOOD INDEX

A numerical value was given each home and neighborhood in order to evaluate statistically the data secured. The scale standardized by the California Bureau of Juvenile Research was used by the social workers on the Survey Staff, and the following material was worked up on the basis of this scale.

*See Research Bulletin Number 7 and 3, California Bureau of Juvenile Research, Whittier, Calif.

The great frequency of "nervous" and psychopathic children, however, is manifest at the Avondale School. Seven and one-tenth per cent of the children in this school were classified as being "nervous" or psychopathic, while only two and four-tenths per cent of the children in the Washington School were psychopathic. It would seem that in one school we are dealing with a matter of intellectual retardation, and in the other school we are dealing with "nervous" and psychopathic conditions.

THE SOCIAL ENVIRONMENT OF THE PROBLEM SCHOOL CHILD

Two hundred and seventy-four children received a careful social investigation. These were all children who had been diagnosed by the Survey Staff as being either feeble-minded, psychopathic or suffering from epilepsy.

We assumed that a mere cross-section study such as was secured in our physical, psychiatric and psychological examinations, could not give all of the facts, and sometimes the most important facts, to be considered in connection even with mentally defective and epileptic children, to say nothing of the cases of psychopathic personality.

The type of home, the intelligence and fairness of parental control, the recreational facilities, and the like, must necessarily be important factors in influencing the development of the mental life of the child.

In securing information, the mother was interviewed and an attempt was also made to see the father and other relatives or neighbors.

The educational, occupational, and health history of the mother and father, brothers and sisters, of each child was secured. Court and institutional records, as well as a history of mental or physical disease or defect in the family, were noted. The personal history of the child, including prenatal, birth, and developmental conditions, was secured. A record of past illnesses and of present physical and mental condition was made. There was a careful inquiry into the child's personal habits and peculiarities; also a history of his past behavior.

Each case was cleared through the Confidential Exchange, and on all families for which social agencies had registrations, the records were read and any history of delinquency or dependency was noted.

When all possible information had been secured in regard to the child and his environment, an index of numerical value was placed upon his home and the neighborhood in which he lived.

For most of the discussion of the problem school child a division has been made into two large groups: first, the children who gave evidence of mental defect; second, the children who were diagnosed as "nervous" and psychopathic. These children always showed personality difficulties and frequently conduct disorders.

Careful social investigations were made for the 147 included in the first group, and for 91 of the second group; also for 12 epileptics. In the case of 24 children, it was impossible to secure sufficient information to enable us to include them in this phase of the study.

GUARDIANSHIP CONDITIONS OF THE CHILD

There are no relationships in a child's life that are more important than that between the child and its parents. If the original home has been broken by separation of the parents, the child is left not only under abnormal conditions in regard to guardianship, but he has often passed through an emotional experience that may place a mark upon his mental life not easily to be effaced.

One out of every three children diagnosed as cases of psychopathic personality, come from homes in which the child's own mother and father are not living together. The psychopathic children, more frequently than the defective, or the normal children, live in homes where a remarriage of either parent has taken place. There were more than twice as many psychopathic children living in homes with other relatives than there were defectives.

HOME INDEX

For the home index information obtained by the investigator is divided into five parts or items. They are as follows:

1. Necessities: the status of the home with reference to the ordinary needs of life; income, food and clothing, shelter, etc.
2. Neatness: the order and taste in which the home is arranged; also its conditions from the standpoint of sanitation and health.
3. Size: relative size with reference to the number of persons living in the home.
4. Parental conditions: the intelligence of the parents in the sense of social adaptability, the extent to which they are living together, and the degree of harmony which usually prevails.
5. Parental supervision: the extent to which the parents (or guardians) exercise their jurisdiction over the physical, mental and moral welfare of the children; the quality and fairness of this control.

After the data for all items are recorded, each item is given a grade on the scale of five points, according to its agreement with published standards. A perfect score would then be five on each of the five items, making a total index of 25. The lowest score would be one on each item with an index of five.

The general social level of the home is summarized in this final index. Furthermore, an analysis of the values given—the various items which, added together, make the final index—frequently shows at what point certain homes are consistently failing, or at what point other homes are particularly successful. As the scale has been standardized and used in other investigations, a home scoring over 20 points is considered favorable on the whole to the best interests of the child. A home scoring below nine is of a very low social level. Eighteen has proved to be the score which most frequently represents the typical middle-class home.

As a result of scoring the homes of the problem school children, it was found that six per cent of the children lived in homes that received an index of 21 or above; 11 per cent lived in homes scoring less than nine. The median home index (the point above and below which 50 per cent of the cases lay) for the whole group was 14. These measurements furnish a general picture of the home situations surrounding these 274 problem school children. A few lived in homes that may be considered favorable to the best interests of the child; many lived in homes of the very lowest social level; the greatest number lived in homes that were midway between typical middle-class homes and those with distinctly unfavorable conditions for the child. To illustrate the conditions that surround a child in a home receiving an index between 13 and 16, the following typical case is given:

FRANK—white; age, 14.

Diagnosis—Psychopathic personality—emotional.

Neighborhood Index—13.

Home Index—14. Divided among the following items:

Necessities—3. Father is a switchman earning \$110.00 a month. Sufficient food and clothing. Rooms are furnished with cheap, but substantial furniture, a few rugs and pictures. Home fairly comfortable.

Neatness—3. Rooms clean but not very well arranged. Inadequate plumbing. Rooms very disorderly in the morning, usually in fair order by afternoon.

Size—3. Mother, father and Frank live in four small rooms on second floor of tenement. No yard.

Parental Condition—2. Mother and father both stopped school before reaching fifth grade. Father is quick-tempered. No actual rupture between parents, but frequent quarrels. Mother is at home most of the time, but exercises little control over the boy.

Parental Supervision—3. Mother particularly interested in boy, but is emotional and physically weak. Father is very severe at times. Little attempt is made to supervise evenings or Sunday amusements.

At no point does this home give evidence of utter failure, yet the general picture is that of a home which has little help to offer to a boy who has well

developed personality difficulties, and has become a behavior problem in school.

One-third of all the mentally defective, psychopathic, and epileptic school children whose social environment was studied, live in homes that score between 12 and 16 and so may be considered to present in general similar pictures. Over half of them live in homes that score less than 13 and so give evidence of more unfavorable conditions for the best interests of the child.

In homes scoring less than nine, the children are faced daily by conditions that almost defy description.

IDA—White; age, 10.

Diagnosis—Mental defective.

Personality—Emotional.

Neighborhood Index—12.

Home Index—7.

Necessities—1. Father an unskilled day laborer. Children all undernourished. Furniture is inadequate and in need of repair. No rugs or pictures. Clothing is dirty and insufficient. Family has received material relief from three social agencies. Income insufficient for needs of family.

Neatness—1. Rooms are filthy and dark. Rags, empty cans, broken dishes in one corner of the room. Food and dirty dishes piled on chairs and table. Two beds in the room where the cooking and eating is done unmade at five in the afternoon. No yard. Brick area way dirty and piled with trash.

Size—1. Mother, father and four children live in two rooms in a tenement. Halls are dark and narrow. No place except the streets for play.

Parental Conditions—2. Father is illiterate, but patient and sensible. Mother has tuberculosis and is very neurotic; seems incapable of carrying on a consecutive conversation. Fair degree of harmony. Both parents present in the home.

Parental Supervision—2. Father interested in the children and attempts to supervise their activities. Mother is incapable of direction or discipline. Two older children have been in Juvenile Court for minor delinquencies.

This ten-year-old mentally defective girl has so far presented no problem to the community except that of school retardation. She is now repeating the first grade for the third time. Personality difficulties have already developed, however, and as adolescence is reached, will probably become accentuated. Little in her home will contribute to a solution of her problems. Handicapped by intellectual defect, suffering from personality difficulties, living in a home that is one of squalor and filth, the future of the girl can be predicted with a fair degree of certainty. A mind capable of normal adult judgments, an emotional life well ordered and under control, or a social environment that would help and not hinder—if any one of these were to be hers, the social prognosis in the case would not be so hopeless.

The final index, the result of evaluating the various elements in the home, gives an indication of the general situation that exists there. The mental defective who comes from a home that scores 22 would seem to have a much better chance of making satisfactory social adjustments than the mental defective coming from a home with an index of seven. However, significant psychiatric implications are revealed only when the index is analyzed. A home may have an index of nineteen, receiving the highest score (five) on necessities, neatness, and size, and yet secure but a score of two on the two items that deal with parental conditions and supervision. The home of a child, high-strung and neurotic, may offer everything needful in the way of physical comfort and convenience, and yet fail at the point that will most intimately affect his mental health and adjustment.

To secure a more definite picture of the general conditions that surround the problem children of the schools, the values placed upon the homes have been studied for each school district.

These investigations were carried on in five school districts, to be designated as Districts A, B, C, D and E.

In District A the homes are almost entirely tenements. There are few one-family houses and congestion is the outstanding characteristic. The people of the district are largely foreigners from South European countries and from Germany. There are only a few colored families. The wage earners are unskilled laborers, with a very few shopkeepers.

In District B unskilled laborers with about the same wage scale as in District A are found. There are many negroes, a large number of Russian Jews, and some Italians, as well as a few native born Americans. Many of them live in small houses set close together, others in tenements. The district as a whole is not as congested as District A.

The school population of District C is largely native-born of German parents. The homes are two and three-family houses with only a few tenements in the whole district. Skilled laborers and shopkeepers and some clerical workers live here. Probaby this district is more nearly a community than any other one of the districts in which we worked.

District D is made up largely of native-born Americans living in one-family houses, many of them owned by the occupants. Clerical workers, store-keepers, highly skilled laborers, and men managing small business concerns are residents of this district. Typical middle-class homes are the rule.

District E is the hardest to describe because there is the widest variation in the type of homes and the type of individuals living there. There is a small colored community, there are a number of foreign born, non-English-speaking small-shop owners, and there are homes of many of the wealthiest people of the city, all in this one district.

A comparison of the 266 home indices secured in these various districts is interesting. No home grading over 20 was found in District A. No home grading under nine was found in Districts D or E. If the colored homes are eliminated from the study of District E, over one-third of the children came from homes scoring over 20.

In District B over one-fifth of the children came from homes scoring less than nine, and in District A, one-eighth of the children came from such homes. This score indicates the lowest social status.

DIAGNOSIS AND HOME INDEX

Disregarding entirely the district from which the problem school children come, a comparison of the home indices for the two groups of children—those who were mentally defective and those who were psychopathic—was made.

Twelve per cent of the psychopathic individuals live in homes scoring over 20; 3 per cent of the mental defectives lived in such homes. Only three psychopathic children were found in homes scoring less than nine; nearly one-fifth of all the mental defectives lived under these most unfortunate conditions. Many of the defective school children were handicapped by defective social environment as well as by defective heredity. As has been stated before, however, only a hint of the psychiatric implications is secured from the home index.

It is in the analysis of the index, in the study of what elements are lacking in certain homes and what elements are present, that the value and significance of the measurement of the immediate environment is revealed.

Since each home was scored on five points,—necessities, neatness, size, parental conditions and parental supervision—a study was made of the values given each of these elements in the home index. For purposes of contrast, the scores placed upon the various items in the homes of the mentally defective school children and of the psychopaths, are presented together in Table 39.

TABLE 39
ANALYSIS OF HOME INDEX
Mental Defectives

Score Given	Necessities		Neatness		Size		Parental Conditions		Parental Supervision	
	No.	%	No.	%	No.	%	No.	%	No.	%
5	11	7.6	16	11.0	7	4.8	0	0.0	1	0.7
4	20	13.8	31	21.4	28	19.3	10	6.9	16	11.0
3	56	38.6	31	21.4	33	22.8	48	33.1	45	31.0
2	41	28.3	38	26.2	55	37.9	68	46.9	63	43.5
1	17	11.7	29	20.0	22	15.2	19	13.1	20	13.8
Total	145	100.0	145	100.0	145	100.0	145	100.0	145	100.0

Psychopaths

Score Given	Necessities		Neatness		Size		Parental Conditions		Parental Supervision	
	No.	%	No.	%	No.	%	No.	%	No.	%
5	16	18.6	18	20.9	15	17.4	1	1.2	1	1.2
4	13	15.1	17	19.8	17	19.8	15	17.4	12	13.9
3	32	37.2	30	34.9	26	30.2	35	40.7	43	50.0
2	24	27.9	18	20.9	25	29.1	23	26.7	23	26.7
1	1	1.2	3	3.5	3	3.5	12	13.9	7	8.1
Total ..	86	100.0	86	100.0	86	100.0	86	100.0	86	100.0

On every point, it will be observed, the psychopaths come more frequently from homes scoring five and less frequently from homes scoring one—this with one significant exception. On the item “parental condition,” we find a larger percentage of psychopaths than of mental defectives coming from homes given the lowest possible score. In determining the value to be given this item, the social adaptability of the parents, the harmony that usually prevails in the home, the adequacy of the arrangements that have been made in case one or both parents are permanently absent, are all taken into account. It is certainly of outstanding significance that the children most handicapped by emotional maladjustments came more frequently than did any other group of problem school children from homes where these elements in the home situation were either entirely lacking or were unsatisfactory.

ANALYSIS OF HOME INDICES OF PSYCHOPATHIC CHILDREN

The chief value of analysis of the home indices does not come from a contrast of two groups that vary so widely both in the psychiatric and social problems that they present, but from a study of the varying scores placed upon the items in the homes within each group. To learn at what points the homes of psychopaths were consistently deficient, and at what points there was but infrequent failure, should both contribute to our understanding of this interesting group of children and aid in the formulation of a program to bring mental good health to many of them.

On the first three items evaluated, which cover the immediate physical surroundings of the child, few homes were found that were markedly deficient. Only one home scored one on necessities (that of a colored family) and only three homes scored one on either neatness or size. Housing conditions for these children were not entirely satisfactory, however, since 29 per cent lived in homes that gave evidence of definite overcrowding.

For the last two items of the scale “parental condition” and “parental supervision”—a very different situation existed. Twelve homes received the absolute minimum on the first point; seven homes received the minimum on the second point. A score of less than three on either of these two factors which so intimately affect the life of the emotionally maladjusted child indicates that most unfortunate conditions surround him and greatly increase the difficulty of social adjustment.

Forty per cent of the homes from which the psychopaths came received a score of less than three on “parental conditions;” 35 per cent received a score of less than three on “parental supervision.”

We cannot say definitely whether the failure of the homes of the psychopathic children on these two points may serve primarily as an explanation of the beginning of the child’s difficulties, or acts as an aggravation of already well developed handicaps. Our figures secured for the whole group and from a study of individual cases indicate that there is an intimate relation between these deficiencies in the home and the maladjustment of the child.

RUTH—White; age, 13.

Diagnosis—Psychopath. Personality—emotional and egocentric.

Neighborhood Index—20.

Home Index—18 (necessities—4; neatness—5; size—5; parental conditions—1; parental supervision—3).

It will be noted that there is no marked deficiency in the physical surroundings of the child. The chief failure in the home lies in "parental conditions," and there is an indication of inadequate supervision.

Personal History and Present Situation. Ruth, who is illegitimate, is now living with an aunt and uncle. She has never been told why she is not living with her mother. Her mother is known as Mrs. _____, lives in Cincinnati, and the child visits her several times during the year. The mother makes no attempt to understand the child and is indifferent to her. The aunt and uncle with whom Ruth lives are both neurotic and irritable. There are no other children in the house. The aunt is a nurse and goes out on cases. Ruth is, therefore, alone much of the time. She admits that she broods over why she is not living with her mother. She creates fantasies to explain the situation, but is not satisfied and wants to "know." She has witnessed an entire lack of self-control on the part of her guardians, and she frankly states that she employs temper tantrums to obtain anything she desires that has been denied her. The aunt and uncle are much interested in the girl and attempt to exercise supervision over her. Their entire lack of appreciation of her difficulties, however, makes the supervision ineffectual.

This case has been chosen not because it is particularly striking, but as an illustration of how the failure of one element in the home situation may frequently be the prime determinant of a child's mental ill health. It has been offered not as an elaborate individual case study, but merely as one of many short studies made of the social environment of psychopathic children. Most of these indicate a failure at the same point—"parental conditions." Any adequate program for coping with this particular type of problem child in the school must take into account this failure in the home. Special classes without psychiatric social service will in many cases prove inadequate. Since the guardianship and supervision of these emotionally unstable and inadequate children is found to be unsatisfactory in so large a number of cases, the community, for its own protection, should undertake to supply the deficiency.

ANALYSIS OF HOME INDICES OF MENTALLY DEFECTIVE CHILDREN

It will be remembered that when the values placed upon the various items in the home score were contrasted for the two large groups of problem school children, on every point except one, lower values were the rule for the homes of the feeble-minded children than for those of the psychopaths. We know, therefore, that in general unfavorable conditions for the best interests of the child are present in most of these homes, but the chief concern of those interested in the development of a program looking toward the satisfactory adjustment of the mental defectives in the community is to discover on what points the failure of their homes is most marked. Since each of the five items in the scale are scored on the basis of five—that number representing highly favorable conditions in the home, one representing most unfavorable conditions, with four, three and two representing varying degrees of favorability—we are justified in stating that any home that scores less than three on any item is markedly deficient in that one respect at least. The first three items cover the physical equipment of the home. On the first, "necessities," 40 per cent of the homes scored less than three; on "neatness," 46 per cent, and on "size," 53 per cent have the two lowest scores. Overcrowding, with the resulting lack of privacy and opportunity for recreation in the home, is the chief failure in the immediate physical surroundings of these feeble-minded children. For both items, "parental conditions" and "parental supervision," 60 per cent of the homes scored less than three, and so give evidence of distinctly unfavorable conditions surrounding the child.

At present there are special classes for defectives in the schools. In these classes specific training is given to the end that these mentally handicapped children may be socially and economically competent. From a study of the homes in which the mentally defective school children live, it seems obvious that more intensive school training is necessary to achieve the desired end. The general picture presented by the whole group of mental defectives, and the detailed picture presented by particular cases, both emphasize the need of social supervision from the psychiatric point of view, as well as for special training.

ETHEL—White; age, 14.

Diagnosis—mental defect. No outstanding personality difficulties.

Neighborhood Index—14.

Home Index—9 (necessities—3; neatness—1; size—2; parental conditions—2; parental supervision—1.

Family History and Present Situation. Father is a boilermaker and makes good wages. He is alcoholic and syphilitic. Mother is shiftless and markedly inadequate in her reactions. Of the 6 children, 4 have had mental examinations—2 are feeble-minded, one is a borderline mental defective, one is subnormal; one cousin is feeble-minded. The parents and 6 children live in a four-room, unpainted house. The rooms are dirty and ill-kept. The yard is piled with heaps of junk. The sheds and barns are in a filthy condition. An older sister, who is of defective mentality, has had an illegitimate child. The mother accepts the sex delinquency of the daughter without a qualm, and no effort is made to supervise Ethel, who has begun to "go with the boys."

When Ethel is questioned, she says: "I've got to get away from the house once in a while. I can't even find a place to sit down there."

Ethel may never become a serious problem to the community. She is a high-grade mental defective without personality difficulties. She is taking a special household arts course in school and is doing well in it. Nevertheless, it is impossible to regard her future except with misgiving. She is attractive and eager for "good times." She is dissatisfied with the home. She realizes that her sister's "mistake" is regarded lightly and without concern by members of the family. She is already planning for the time when she can leave school and get a job. "I'll have better times then." This girl needs kindly, but firm and intelligent supervision.

If her inadequate judgments could be supplemented by those of an adult for whom she had respect and liking, and who was fully conscious of the social and psychiatric implications in the case, the social prognosis would be more hopeful.

Of all the homes of mentally defective school children that were visited during the course of this investigation, one-fifth were found to be filthy, disorderly, and unsanitary. Half gave evidence of serious overcrowding. Only in rare instances were conditions in any way satisfactory in regard to supervision, interest and understanding of the child's problem.

An educational program for this group of problem children of the schools that does not take fully into account these conditions in the home will be disappointing in its results. Guidance after leaving school is an important as training in school. A noteworthy beginning has been made in Cincinnati in the working out of this further problem by the Vocation Bureau. All children passing through the Placement Office who are known to be feeble-minded are placed under definite supervision as long as they remain in industry.

NEIGHBORHOOD INDEX

The social environment of every child is found both in the home and in the neighborhood in which he lives. The home may be favorable to the best interests of the child and the neighborhood may be unfavorable, the situation may be reversed, or both may be favorable. But, whatever the combination, each will contribute a definite share to the determining of the child's mental make-up and social reaction.

In the study of the home of the problem children, each home was scored on specified items and a final index was secured. For the evaluation of the neighborhood in which these children live, the same system was used.

The neighborhood is graded upon the basis of five points:

1. Neatness, sanitation, improvements (the status of the neighborhood with reference to general appearance, cleanliness, sanitary equipment, and modern improvements.)

2. Recreational facilities (the extent to which provision is made for recreation in the home and neighborhood.)

3. Institutions and establishments (the kind and value of educational, industrial and social institutions in the neighborhood, with special reference to their probable moral effect on the neighborhood.)

4. Social status of residents (educational, vocational and moral conditions—including standards of living.)

5. Average quality of homes (an estimate of the probable range of home indices which would be given if each home were scored as carefully as the one home visited.)

Each of the five items is graded on a scale of five points, one point representing decidedly unfavorable conditions; five points representing favorable conditions; and two, three and four representing conditions of varied favorability between the two extremes. After each item has been graded, the five scores are added and the sum stands as the neighborhood index. If a neighborhood index is over 20 points, it indicates as a general classification that very good conditions prevail; an index between nine and thirteen indicates poor conditions. All scores under nine indicate that most unfavorable conditions for the best interests of the child are present.

The distribution of the total number of neighborhood scores is given in table 40.

TABLE 40—DISTRIBUTION OF NEIGHBORHOOD INDICES

Neighborhood Index	Number	Per Cent
25	12	4.4
24	7	2.6
23	2	0.7
22	0	..
21	0	..
20	1	0.4
19	1	0.4
18	23	8.4
17	8	2.9
16	41	15.0
15	50	18.2
14	15	5.5
13	74	27.0
12	12	4.4
11	5	1.8
10	6	2.2
9	6	2.2
8	8	2.9
7	3	1.1
TOTAL.....	274	100.0

Seven per cent of the neighborhoods in which the problem school children lived were in the highest group, 14 per cent lived in neighborhoods scoring less than 13, which indicates unfavorable conditions. The median neighborhood index was 15.

There is a marked variation in the neighborhood indices given in the different school districts. The most frequent score ranged from thirteen in one district to 25 in another. Since there was this wide variation in the values placed upon the neighborhoods in the different districts, a comparative study was made for each school of the scores for the mental defectives and for the psychopathic school children.

In only one district did a larger proportion of the mental defectives than of the psychopaths come from the better neighborhoods of the district. In the other four districts a very much larger percentage of the psychopaths were found in these better neighborhoods.

The families of the mentally defective school children, content with less, shift into the least desirable sections of these school districts. Not only do defectives come from defective homes, but in many instances, they seek defective neighborhoods. The mentally defective child is faced by an environment in home and in neighborhood, that, day after day, brings into his life all those influences that will make socially acceptable conduct well-nigh impossi-

ble, and few of the better influences that will aid in his difficult problems of adjustment.

ROY and EDWIN—(brothers)—Colored; age 6 and 7.

Diagnosis—mental defect.

Home Index—8 (necessities—1; neatness—1; size—3; parental conditions—2; parental supervision—1).

The father died of delirium tremens, and the stepfather has deserted the mother. The only income is the money which the mother makes as a scrub woman. Her brother lives in the home and has most of the care of the boys. The mother is disagreeable, whining, and given to sudden gusts of temper. She has been sexually promiscuous.

Neighborhood Index—8.

Neatness, Sanitation and Improvements—2.

A row of ill-kept houses built close together. Small front yards strewn with rubbish. Rough pavement in which were pools of water thrown out from the houses after having been used for washing. Streets poorly lighted.

Recreational Facilities—2. No recreation in the home. A playground six blocks away. Cheap amusements within two blocks.

Institutions and Establishments—2. No provisions for social life of colored residents of districts.

Social Status of Residents—1. Many illiterates, unskilled laborers; both white and colored prostitutes. Noisy and disreputable neighborhood.

Average Quality of Homes—1. Few homes in the immediate vicinity would score more than 9. The home visited was apparently no worse than others in the neighborhood.

The two boys, one in the kindergarten, the other in the first grade, are both serious behavior problems. They are quarrelsome, restless and troublesome. In the class room they are noisy, rude and bold. Both of them disseminate perverted sex information. At home they are stubborn and disobedient. Both are feeble-minded with marked personality difficulties. They live in a home where sex delinquency is present. They live in a neighborhood where there are many prostitutes. Neither the home nor the community is at the present time offering any adequate supervision in the helpful solution of the problems these boys present.

Early diagnosis has been secured, but unless it is followed by proper supervision and adequate training, nothing will have been gained. It can be predicted almost without qualification that unless such supervision is provided, ten years from now both will have been guilty of serious social misconduct, and will be in need of placement in a custodial or correctional institution.

THE EPILEPTIC SCHOOL CHILD

In the five schools in which examinations were conducted, twelve children were found to be suffering from epilepsy. Too often it is forgotten how great is the handicap in each one of these cases—how almost invariably the individual's life is nothing but a tragedy of continued attempts and failures to make proper adjustments. A psychiatric social investigation was made in each case, to determine, if possible, what elements in the environment would help or hinder in the difficult problems of establishing these children as socially acceptable members of the community.

Nothing of particular note in regard to the guardianship of these children was found. Nine were living in homes in which both father and mother were present; three were living with one parent alone, or with one parent and a step-parent.

No one of these children was an only child, but the families from which they come are not large.

The maladjustments noted in these 12 families all come under four general heads—serious physical disability, outstanding behavior difficulties, evidence of mental defect, and alcoholism. Four of these epileptic children have brothers diagnosed as feeble-minded. The mother of one gave a history of marked retardation in school. Two cases of alcoholism and one case of insanity were noted in the immediate family of one individual.

Six of the children diagnosed epileptics are also suffering from personality and behavior difficulties. It was noted that the number of maladjustments

in the families of these six were greater than in the families of those who were not handicapped by personality difficulties.

In general the families of these epileptic children can be called neither better or worse than the families of the other problem school children.

HOME AND NEIGHBORHOOD INDEX

As in all other cases, a numerical value was placed on each home and neighborhood from which these children came.

The distribution of these values is in general the same as for the total number of problem school children studied. Only two epileptic children came from homes that gave evidence of offering conditions in any way favorable to the best interests of the child. The four who came from homes that may be definitely classified as unfavorable, have shown behavior difficulties as well as epilepsy.

In no case does the home of an epileptic child receive the highest grade—five—on any one of the items scored. The chief points of failure in the immediate environment are found in the crowded, unsanitary and disorderly conditions of the home.

THE R——— FAMILY

The many angles of the problem presented by these children, the cost in time and money, the social callousness that permits them to drift from agency to agency until they have become unimprovable, may be illustrated in the case of the R——— family.

This family first came to the attention of the Survey Staff at one of the schools where Ella was examined and diagnosed as psychopathic with borderline mental defect. Such a diagnosis placed her in the group for psychiatric social investigation. This investigation revealed the following situation, as to home and neighborhood conditions.

Home Index—7 (necessities—2; neatness—1; size—2; parental conditions—2; parental supervision—1.)

Neighborhood Index—16 (sanitation—4; recreational facilities—3; social institutions—3; Social status of residents—3; average grade of homes—3).

It is evident that we have a very lowgrade home, deficient in nearly every respect. The chief deficiencies, however, are in the neatness and order of the home, and in parental supervision. It was learned that Ella's mother had died of influenza in 1918, and that the 13-year-old Ella was endeavoring to manage the household, consisting of her father and 2 younger brothers. The father was a butcher who was indifferent to the children and inadequate in every respect as regards the home. The reason for the two low scores becomes evident. Already the lack of adequate supervision in the home had produced its effect; an older sister, Edna, had been a sex delinquent since 1919 (the mother died in 1918), and was at the Girls' Opportunity Farm. Before going into the ramifications of this family history, we will give the personal history and the clinical findings.

Personal History. Ella was the fifth child in a family of ten children, 13 years and 6 months old, in the sixth grade, having repeated the second and fourth.

Clinical Findings. Physical condition, good; condition of jaw caused Ella to drool at the mouth occasionally. Mental age, 10 years and 11 months, I. Q. 70. Personality, inadequate—weak-willed, suggestible. At the time of the examination, Ella was apathetic and indifferent. She was self-conscious regarding the malformation of her jaw, about which she had been much teased. After having spent several years at various orphanages, she was now at home trying to carry the burden of a family never too well established, but now rendered rudderless by the death of the mother. An older sister had already become submerged and was an inmate of a correctional institution.

We have here a picture of a defective girl, handicapped physically, mentally, and socially.

The family next came to the attention of the Survey Staff at one of the orphanages, where two of the children were discovered; the family had been broken up and the children scattered. In rapid succession the remaining children were discovered by the Survey Staff as inmates of two other orphanages. Finally the climax was reached when Ella herself was discovered by the examining staff at the Girls' Opportunity Farm where she had succeeded her sister. She had become a sex delinquent. The clinical examination and personal history at the farm gave somewhat different results than the examination some months before at the school. For one thing it revealed the fact that Ella had become infected with both syphilis and gonorrhea.

Her personal history revealed that she had been handled by orphanages and agencies as follows: orphanage—2 months; orphanage—1 year; orphanage—1 year; uncle—6 months; placed with four different families; Opportunity Farm for the last 4 months.

The orphanages had found it impossible to place her in a foster home because of her physical handicap, which rendered her repugnant. For the same reason one of the orphanages

had refused to keep her. Her sex delinquency had presented no dramatic incidents and was the expected consequence in a defective, inadequate girl.

The Clinical examinations by members of the Survey Staff, of Ella's brothers and sisters had revealed that two were cases of borderline mental defect and two were cases of subnormal intelligence. Another brother had also become delinquent, was in the Boys' Special School because of chronic truancy, and had been diagnosed mentally defective by the Vocation Bureau.

We have in this family of delinquents, two whose misconduct was of so serious a nature as to result in commitment to a correctional institution. There is a constant history of dependency. Investigation revealed that this family have had contacts with ten social agencies in Cincinnati, divided as follows: 2 agencies dealing with dependency (not including orphanages), 3 agencies dealing with delinquency, 5 agencies dealing with health. It should be noted that the delinquent careers of these children all began after the year of the mother's death.

The picture is appalling. The futility of that sort of social work which deals with end results instead of fundamental causes is illustrated.

As a problem in dependency, the family was mishandled. In delinquency the family became a problem also. The greatest oversight, however, becomes evident when it is understood that the development of these problems might have been predicted long before. The family is undoubtedly from defective stock. However, it was kept together with a fair degree of success during the lifetime of the mother, although it must be noted that the family had applied even then to social agencies for help, thus bringing it into contact with organized social effort. The deterioration of the family was rapid after the death of the mother. The score of the home indicates defective elements, and the added defects of insufficient parental supervision develop the potential delinquency and dependency in the children. Mental diagnosis resulting in psychiatric social interference at any stage of the history might have saved the family to the community. It certainly would have saved the organized social agencies money.

SUMMARY OF STUDY OF PUBLIC SCHOOL CHILDREN

The survey included a study of 4,326 public school children in Cincinnati. Four thousand one hundred and fifty-five were native born. There were 4,055 white children and 271 colored children in the group studied.

Thirty-nine per cent repeated over 2,250 grades at an estimated cost of \$143,000.

The range of chronological ages in each grade showed a variation of from six to eight years.

Twenty-five and one-tenth per cent were advanced for their ages, according to grade, while 36.6 per cent were retarded according to grade for age.

Twenty-seven and three-tenths per cent had test ages that coincided with their chronological ages; 29.5 per cent were over age mentally, and the remaining 43.3 per cent were retarded from one to eight years mentally.

Two per cent were classified as feeble-minded, two per cent as cases of borderline mental defect, three and five-tenths per cent as either nervous or psychopathic, four and eight-tenths per cent as subnormal, two-tenths per cent as cases of epilepsy, and seven-tenths per cent as suffering from endocrine disorder.

Nineteen and three-tenths per cent of the children classed as normal, 60.1 per cent of the children classed as subnormal, 65.1 per cent of the cases of borderline mental defect, 46.5 per cent of the feeble-minded and all of the cases of psychopathic personality showed character defects and personality handicaps. This in a measure explains why it is from these groups that we largely draw our delinquent, dependent and socially maladjusted individuals.

Six and two-tenths per cent of the children studied showed such outstanding disorders of conduct as clearly to depart from average normal behavior. It is not surprising to find that while only three and three-tenths per cent of the normal children had conduct disorders, 13.9 per cent of the subnormal children, 14 per cent of the feeble-minded children, and 43.4 per cent of the "nervous" and psychopathic children had repeatedly exhibited socially unacceptable behavior. This finding certainly points out in the direction in which our delinquency problem lies.

Approximately 66 per cent—two-thirds of the group—were suffering from physical disease or defect or showed evidence of some physical ill health.

A study of 274 feeble-minded, psychopathic and epileptic school children was made which included a very thorough investigation of their environments

and their home and living conditions. It may be noted that 62 per cent of the families of the feeble-minded school children have records with social agencies in Cincinnati, while approximately half of the families of psychopathic children have come in contact with social agencies.

Of the 274 feeble-minded, psychopathic and epileptic children upon whom social investigations were made, 38 per cent of the families had registrations from agencies dealing with problems of health; 30 per cent had registrations from agencies dealing with dependency, 26 per cent had registrations from agencies dealing with delinquency.

A numerical index was given to home and neighborhood, rated on various different points which are explained fully in the text.

Forty per cent of the homes from which the psychopathic children come received a very low score on parental conditions, (harmony, adaptability, intelligence, understanding, etc.); in 35 per cent of the homes of psychopathic children an exceedingly low score was given to proper home control, parental supervision, guidance and training.

In the homes of feeble-minded children, almost half scored exceedingly low on simple necessities in the way of food, clothing, heat, etc.; 46 per cent of the homes of the feeble-minded children received the very lowest possible score on sanitation, and the ordinary minimum health requirements for living conditions. In the homes of the feeble-minded persons, 53 per cent received the very lowest score possible on size, there being great overcrowding, lack of privacy, etc.; 60 per cent of the homes of the feeble-minded children received exceedingly low scores on parental conditions, parental supervision and control, and moral training.

These findings were practically repeated in our social investigation of the homes of epileptic children.

SPECIAL CLASSES

The public school system of Cincinnati ranks ahead of those of most cities in the number and kinds of special classes that it has, to take care of the misfits in the regular school population, who, because of mental or physical defects or language difficulties, are unable to hold their places alongside of the normal child. In this system the following kinds of special classes are included:

1. Classes for Mental Defectives.
2. Observation Classes.
3. Opportunity Classes.
4. Pre-vocational or Industrial Classes.
5. Classes for Delinquents, including the Boys' Special School and the schools at the Girls' and Boys' Opportunity Farms.
6. Conservation of Vision Classes, including the Blind Classes.
7. Oral Classes.
8. Open Air Classes, including the Classes for the Pre-tuberculous Children at the Branch Hospital.
9. Classes for Crippled Children at the General Hospital.
10. Classes for Foreigners.

(1) The first single class for mentally defective children was organized in 1909. Since then the need for these classes has grown to such an extent that they now occupy an entire school building; in addition to this there is a separate class in each of six of the regular schools. The average attendance in November of this year was 379. For this number of pupils there are 22 teachers and one supervisor, making an average of about 17 pupils to the teacher. The salary of these teachers is the same as that of the public school teacher—that is a minimum of \$1,100 for a normal school graduate, \$1,200 for a college graduate, and an increase of \$100 each year until a maximum of \$2,000 is reached. The supervisor is on a regular principal's salary which has as its maximum \$3,500. About three-fourths of the teachers have had special training for their work

either at the Vineland Training School for the Feeble-minded or at the New York University Summer School or at the Cincinnati University.

The pupils for this special school are selected by the Vocation Bureau and only those who are definitely defective are sent to it—that is, the highest group are those whose mental ages as adults will not be much above 10 years. Usually the lowest grade children who are sent to the school have intelligence quotients of about 50. The Vocation Bureau sends to the school a report of the mental condition of each child, and at first he is placed in the grade which this report would indicate was proper for him. The placing according to grades is very flexible, however, as the children are taught as individuals, and a pupil may do first grade arithmetic, second grade reading and seventh grade manual training. About 50 per cent of the school day is given over to academic work. The boys have manual training (wood work) one hour a day, the girls cooking, sewing and laundry work two hours a day. One-half hour each day is given over to physical training; music (rote singing) also furnishes part of the program. Sense training is emphasized among the younger children, for which the Montessori materials are used. Stress is laid on the teaching of personal habits of cleanliness and decency, and each child is required to take at least one bath a week in the school showers. Another interesting feature of the day's work is the luncheon program when a five-cent hot lunch is served. The older girls and boys wait on the tables and the teachers eat with the children and instruct them in the correct way to eat and conduct themselves at the table. All of the academic training is exceedingly practical and an effort is made to relate all of the child's work to the problems of everyday life. For instance, in arithmetic the child is almost never given mere abstract problems. Instead, he is taught to make change for purchases and to figure out how much so many yards of cloth ought to cost. In the custodial class, where the children are low-grade defectives, very little academic work is attempted, most of the time being given over to training in personal habits, sense training and rhythmic games. The pupils are not seated at regular school desks. There are four large tables in each room with four children sitting at each table. This allows for an informal conducting of classes.

The separate school building in which most of these classes are held is an old building, but it contains a fairly well equipped, though rather small gymnasium, a shower room, a manual-training room with equipment for all kinds of wood-work, and a domestic-science room for cooking and laundry work.

In the twelve years since the Special School was started, it has developed into a very efficient school using all the modern methods and theories of educating the feeble-minded. Every effort is made to teach these unfortunate children to take their places in the community and to become as useful citizens as is possible with their low mentality. The effort to place the children in industry as they leave the school is done through the Vocation Bureau.

(2) The observation classes were established to take care of the bad academic failures in the first and second grades, who when tested by the Vocation Bureau, were found not to be defective. There are in the city three observation classes located in three different schools, with a total average attendance of 61 pupils and three teachers. The teachers of these groups are unusually resourceful elementary school teachers, and with the average of 20 children to a teacher, they are able to make their instruction more individual. The course of study is practically the same as that given in the regular school grades. The pupils may be passed back to the regular school classes at any time during the year if the teacher considers that they can do the work of their regular grade.

The first year that the observation class was started, 14 children were placed under a very good teacher in the Peaslee school. Of this group four proved to be defective. Two did three year's work during the first year of the class and were entered in the fourth grade the following year; three did two years' work in one year and were entered in the third grade; one did a little

over one year's work and was entered in the second grade. The remaining four continued in the Observation class another year. Thus the idea is to eliminate the school retardation due to some maladjustment other than mental defect, which is so frequent in the lower grades, and to keep this type of retarded child from being a misfit all through his school life because of failure in the first and second grades.

(3) The term "opportunity class" has been applied to a variety of classes. In most of the classes they exist from the third to the fifth grades. They are intended for children who are more retarded academically than mentally and can be expected to make more than average progress for a time, and also for children who, though not actually defective, are so mentally inferior that they cannot keep up in the regular grades. Pupils are admitted to these classes by recommendations from the Vocation Bureau which in selecting this group aims to:

"(1) Eliminate mental defectives.

(2) Select retarded children of approximately normal ability who can make up part or all of their retardation and be returned to the grades.

(3) Select retarded children of inferior ability who can do better work in a small group and with the more varied curriculum."

These classes are conducted in seven different schools and they had a total average attendance in November of 555 pupils from all over the city. These classes are conducted somewhat differently in the different schools. However, the center of this work is at the Dyer School, and the classes there are typical in general of the others. At the Dyer Opportunity School, the average attendance during November of this year was 180 pupils, with from 25 to 30 pupils to a teacher, and one supervisor. About three hours of the school day is devoted to academic work and two hours to artistic and manual work. The opportunities for manual work include wood work, metal work, tire vulcanizing, pipe outfitting, electrical work, shoe soling and printing. The industrial work for the girls includes sewing, cooking and weaving.

(4) The Pre-vocational or industrial classes in the elementary schools were established to take care of the pupils who did not intend to remain in school any longer than the time required by law. It was learned by experience that this group comprised almost all of the badly retarded children in the school who were making a complete failure in the last two grades. It was believed that a course with greater stress on manual work should be devised for them, so that they would leave school with some industrial efficiency. It was also found that this group of children could do much better work along manual lines and that they were thus taken away from the atmosphere of failure which was the worst possible influence for them. Very often the children who have completed the work in the opportunity classes are passed on to these industrial courses.

Five different schools now have these industrial classes, and each is run as the needs of that particular school population demand. In most cases they are classes for the retarded children who indicate their desire to take the course instead of the regular grade of work of the fifth, sixth and seventh grades. However, one school takes children from the third grade and another takes them through the ninth grade and offers courses that are practically Smith Hughes Vocational classes. It is not required that these pupils be examined by the Vocation Bureau before they are admitted to the pre-vocational courses. The average attendance in November in all of these classes was about 857. The course of study in most of them is two-thirds academic and one-third vocational work. The vocational courses offered are preliminary work in wood and metal work, printing, sewing, cooking, typewriting, and stenography. In some of the schools, in the higher grades, only half-time is given to academic work, the rest being occupied with vocational work.

(5) There are three different schools for delinquents in the public school system: the Boy's Special School and the schools at the Boy's Opportunity and Girl's Opportunity Farms. The Boy's Special School is made up of truants and delinquents committed by the Attendance Department of the Public Schools and by the Juvenile Court. Every boy is also examined at the Vocation Bureau. The average attendance in November was 52. The total number of regular teachers is three and in addition to this there is a manual training teacher half of every day and an art teacher once a week, making the number of pupils per teacher about 17. No special training, other than that required of every school teacher, is required of the teachers, and they are on regular public school salaries. The principal of the school is on a regular principal's salary. Nearly one-half of the day is given over to manual and art work, the other half being devoted to academic courses. The grades in the school run from one through eight. The manual-training room is well equipped for all kinds of wood work. The school is much handicapped by not having a gymnasium, because physical training ought to be a part of every school course and is especially important with boys of this character. Another disadvantage of this school is that there is no provision for serving the pupils a hot lunch at noon, even though they come from all over the city, making it impossible for many of them to return home for the noon meal.

The Board of Education also conducts the schools at the Girls' and Boys' Opportunity farms. The average attendance for November at the Girls' Opportunity Farm was 56, at the Boys' Farm it was 71. The Girl's school has two teachers, making an average of 28 pupils per teacher, while the Boys' School has three teachers, making an average of 27 pupils per teacher. The teachers in these classes are on regular public school salaries. The course of study in these schools is much the same as in the regular grade schools, the greatest stress being put on the academic work, though some time is given to teaching sewing, stenography, and typewriting to the girls and manual training to the boys.

(6) The classes for the blind are of two different kinds:

- (1) The conservation of vision classes.
- (2) The blind classes.

Before children are accepted in the school, they must be examined by the school oculist and a report filed in the supervisor's office as to their vision defect. Those who are found to have between one-third and one-tenth vision, even when corrected as far as possible with glasses, are placed in the conservation of vision classes, while those with one-tenth vision or less are put in the blind classes. The average enrollment for November was 64, with 16 in the blind department and 48 in the conservation of vision classes. There are seven regular teachers, one supervisor, and one visiting teacher, the latter being free from class room work and able, therefore, to do a good deal of home visiting to educate the families as to how best to save the vision that the children have. The number of pupils to a teacher is about seven. The salaries of the teachers are \$150 more per year than those of the regular teachers. The supervisor is on a regular principal's salary. Although no special training is required of the teachers, they are given lectures during the year on conservation of vision. The state pays all the additional expenses for these classes over the regular per capita cost to the Board of Education for every school child.

The basic principle of the work is to have the children participate as far as possible with the normal children. For this reason the blind classes are in the regular school buildings, and the pupils have as many of their recitations as possible with the regular grades. Every effort is made to get the blind children away from the artificial standards which the teacher unconsciously makes for pupils so handicapped, and they are trained to take their places in the world alongside of seeing people. The course of study is much the same as that in the regular school system except that special attention is given to sense training and hand work and every effort is made to broaden the child's experience, a thing very necessary with a blind child because he cannot

gain his experience in the ordinary course of the day's work as the seeing child does. The classes are fully equipped with typewriters, Braille writing appliances, Braille books, educational models, charts, special maps and globes.

The conservation of vision classes have as their aim the attempt to conserve all the vision that the child has. To this end the very best and most modern system of lighting, to prevent shadows and a glare, is used, together with Molthrop desks, large-print books, special illustrative pictures with a few lines, and paper with no glaze, and the children are taught an especially round handwriting because it is easier on the eyes. The pupils in these classes always recite with the regular grades. The function of the teacher is to be the eyes for the child. If there is no large-print text book for the child to use in connection with the lesson assigned, then the teacher reads the lesson to him.

The children in both of these groups of classes have special corrective exercises for posture, as eye defects often cause very bad positions.

The state law which provides for the establishment of these classes has elaborate requirements as to the size of the class rooms, the equipment desired, the number of pupils to a teacher, the kind of lighting, the color of the walls of the school room and the amount of extra blackboard area, these latter requirements being, of course, for the conservation of vision classes.

(7) The oral classes are of three different types:

(1) Classes for the totally deaf, who are taught through the eye and feeling sense.

(2) Classes for the semi-deaf, who are taught through hearing sometimes by the aid of ear phones.

(3) Corrective speech classes for hearing children in the schools.

The classes for the totally deaf and semi-deaf are all in one regular grade school building. The number of pupils in these two groups is 55. There are eight teachers and one supervisor, making an average of seven pupils to a teacher. All the teachers are unusually efficient as they are required to have special training for work with the deaf, either at the State Training School for the Deaf or in some other training school, and they receive \$150 more per year than the regular school teacher. The supervisor is on a regular principal's salary. This department, as well as the blind department, receives a state subsidy.

The course of study in the first and second grades of the school has speech language as its major subject. After that, however, the aim is to pursue the regular school course, and the children are taken through the eight regular grades. The children of the older grades have manual training, domestic science, art, and writing with the regular public school classes, the idea being that they gain a great deal by association with normal children whenever this is possible.

In addition to this work at the Oral School, there is a visiting teacher who works with corrective speech in the regular schools. This teacher rotates from school to school staying ten weeks in each school; she takes six pupils at a time for one-half hour periods and helps them to correct their speech defects. Cases of bad speech defect are reported by the principal of the school to this visiting teacher.

(8) There are five different schools that have open-air classes for the underweight and anemic children who are accepted in a class only after a complete physical examination by the school physician. The average attendance in November in these classes was 102. These classes are given from the first to the seventh grades. The five teachers who conduct these classes are on regular school salaries. The average number of pupils to a teacher is about 20.

Only about three hours of the school day is given over to academic work, the rest of the time being spent on health measures. Every effort is made to build up the children physically. They are fed milk at nine in the morning and at three in the afternoon and given a hot lunch at noon. Each child has its

temperature and pulse taken every morning. A shower bath each morning and a complete rest for one hour every afternoon also form part of the day's program. The children are all equipped with coats, hoods, gloves and warm boots and each child also has a cot and a sleeping bag for his or her afternoon rest. Every child sees the school doctor twice a week, and at such times is weighed and looked over by him.

Two fresh-air classes for pre-tuberculous children are also conducted at the Branch Hospital. The average attendance in November was 92.

The following figures show how successful these classes have been in the last year.

TABLE 41—FRESH AIR SCHOOLS*

	Number in Class	Average Gain per Pupil per Term Pounds	Greatest Gain for Term Pounds	Gained more than 5 Pounds		Lost Weight During Term
				Boys	Girls	
Tuberculosis Sanatorium	54	4.912	23½	10	10	7
Dyer School	26	4.778	12	7	4	1
Sands School	27	6.175	13	7	11	1
Guilford School	29	6.31	12¾	5	11	0
Douglass School	21	4.226	12¼	4	3	1
Rothenberg School ...	25	4.1	8	8	5	1

(9) The public schools also conduct, with the aid of a state subsidy, a school for crippled children at the General Hospital. The classes for these cripples are of two different kinds, as there is an effort made to teach the convalescent children on the wards as well as to conduct a school for crippled children out in the community. The number of these convalescents, in November, who were taught by the one visiting teacher was 78. The number of crippled children who came into the school from outside was 83, for which there were four teachers, including the principal. These teachers receive \$150 more per year than the regular school teachers' salary. The children are conveyed to the school in busses. Beside the regular school course, these children have such industrial work as is suited to their limited capacities. Basket weaving and reed work are taught, as well as sewing. A great deal of emphasis in this school is laid on the building up of these children physically and a remarkable amount has been done by modern plastic surgery toward correcting their physical infirmities.

(10) There is only one class exclusively for foreigners in the city. This had an average attendance in November of 24 pupils, with one teacher. Some of the schools have made special provision for teaching the foreigners in their own district along with their regular classes, but this class is the only one that takes foreigners from all over the city, and has, as its one subject for study, the English language. As soon as the children can speak enough English to get along in the regular grades, they are passed on to them. The course of study includes grammar, reading, writing, and story telling in all of its forms.

SUGGESTIONS

Any suggestions as to the improvement of the special classes would, in order to be carried out, necessitate an increased expenditure, which is unfortunate because, due to the failure of the additional school levy to pass, the school board is forced to cut down expenses this year in almost every department.

Conditions call for a much larger special school for defectives, as there is at present a large waiting list made up of pupils who have been recommended for this work by the Vocation Bureau. Our present survey shows that there are between 800 and 900 mentally defective children in the public schools. Provision should be made for classes in the outlying districts to do

*Cincinnati Sanitary Bulletin, November 10, 1921.

TABLE 42—SPECIAL CLASSES

Special Classes	Number of Pupils	Number of Teachers	No of Pupils Per Teacher	Salary of Teachers Min. Max.	Special Training Re- quired of Teachers
I. Mental Defectives	379	22 and 1 Supervisor	17	\$1100 \$2000	About $\frac{3}{4}$ have special training
II. Observation Classes	61	3	20	\$1100 \$2000	None
III. Opportunity Classes	555		Between 25 and 30 usually	\$1100 \$2000	None
IV. Prevocational Classes	837		Usually the same as in the regular grades	\$1100 \$2000	None
V. Classes for Delinquents (1) Boys' Special (2) Classes at Boys' Opportunity Farm (3) Classes at Girls' Opportunity Farm	52 71 56	3 and 1 half time and a Principal 3 2	17 27 28	\$1100 \$2000 \$1100 \$2000 \$1100 \$2000	None None None
VI. Conservation of Vision Classes including the Blind	64	8 and 1 Supervisor	7	\$1250 \$2150	Lectures given to teachers on the eye
VII. Oral Classes	55	8 and 1 Supervisor	7	\$1250 \$2150	Training at schools for Deaf
VIII. (1) Open Air Classes (2) Tubercular Classes	102 92	5	20	\$1100 \$2000 \$1100 \$2000	None None
IX. Classes for Cripples (1) Convalescents in the Wards (2) Cripple School at General Hospital	78 83	1 3 and Principal	78 20	\$1250 \$2150 \$1250 \$2150	None None
X. Classes for Foreigners	24	1	24	\$1100 \$2000	None

Figures for number of pupils in the different types of classes were taken from the November attendance report with the exception of the Pre-Vocational Classes which were obtained from the principals of the various schools in which the classes were situated.

away with the long car ride that many of the pupils must take at present. Equipment for industrial training, besides the training in wood work now provided, would increase the value of the school a great deal. The salaries of the teachers should be larger than those of the regular school teachers, as special training for work with the feeble-minded ought to be required of every teacher doing this sort of work.

An even more serious need of the special class system is, however, a larger and better Boys' Special School. This school, at present, seems to be merely a place to segregate the bad boys, and is not nearly as well equipped as the regular grade school.

Unless these two schools are large enough, there is a tendency, even though guarded against by the Vocation Bureau, to push the feeble-minded and problem cases into the observation, opportunity, and pre-vocational classes, thus destroying the full value of these types of classes.

The observation, opportunity, and pre-vocation classes have proved themselves to be of great value in dealing with the retarded child who is not mentally defective, and they should be so increased and enlarged as to take care of all such misfits in the school population. There should be supervisors over each of these types of classes. Admittance to the pre-vocational classes should be subject to the approval of the Vocation Bureau in the same manner in which this is required with the observation and opportunity classes.

DISCUSSION OF PUBLIC SCHOOL FINDINGS

Approximately 12 per cent of the public school children in this survey were classified as either subnormal in intelligence, mentally defective, "nervous" or psychopathic, or suffering from epilepsy or endocrine conditions.

It will be remembered that we found 6.2 per cent of the public school children showing conduct disorders. A great majority of these behavior cases were found amongst those mentally handicapped.

These children are not only difficult problems for the school authorities today, but, if not properly diagnosed, given suitable medical and psychiatric treatment, educational training, and, in the case of those needing such care, kindly and friendly oversight and supervision, the great majority are destined later on in life to social failure and mental breakdowns, thus providing our public authorities and private agencies with their unimprovable cases of dependency, delinquency, and insanity, conditions that are already costing this community millions of dollars.

It cannot be stressed too strongly that the measure of our intelligence in preventing crime (a condition that, it is estimated, is costing this country more than two and a half million dollars a day to handle), insanity (which is requiring more hospital beds than all other medical conditions), dependency (a condition that from generation to generation, through our expenditure of millions in relief, has provided socially minded persons with an outlet for their charitable impulses), is the degree of thoroughness with which we organize machinery in connection with our public schools for recognizing and adjusting those individuals who, because of their mental, physical, and social handicaps, are the potential criminals, insane, and dependents of the future.

Our survey has shown that the public schools of Cincinnati are particularly well equipped to deal with the problem school children whose short-comings are largely within the field of general intelligence, learning capacity, vocational aptitudes, etc. However, the psychopathic children and the children that show conduct disorders, which form such a large percentage of the problems of the public schools of this city, are not effectively dealt with. The conditions from which they suffer are not adequately recognized and given that medical and social treatment which full understanding and appreciation would demand.

This is a matter of the most serious import if we are going to dam the stream at its source.

The most fundamental need that this survey of the public school children has pointed out is for a central psychiatric clinic to which may be sent those problem school children who require the most intensive and well-rounded study, medical, psychiatric, and social treatment, and adjustment.

We cannot close without some reference to the so-called "normal" child whom we must not forget in our efforts to aid the abnormal. The mental diagnosis table shows that 3,003 out of the 4,326 studied were "normal." This must not be construed to mean that they were at all similar. Closer analysis shows that only 880 of them were at age; 707 of them repeated grades; 245 were irregular in their attendance at school; 253 were rated by the teachers as doing "poor" school work; 192 of them were in very poor health and needed medical attention; 98 had shown serious behavior conditions and disorders of conduct; 580 showed some character defects and personality difficulties. We find among them almost every possible divergence, though perhaps on a less glaring scale than in the case of those who were considered mentally handicapped.

We could commit no more serious error than to classify these children as "normal" and then cease to bother about giving them individual training. That these "normal" children do get into trouble and provide society with many social problems is shown by this report, and yet it is from them that all of the promise of the future is to be expected. Real mental hygiene work will find amongst this group an incalculable return on any investment.

CLINICAL FACILITIES FOR EXAMINATION OF MENTAL CASES IN CINCINNATI

The following are the agencies which offer clinical facilities for some type of mental examination in Cincinnati.

	Source of Finance	Type of Service Rendered
1. Vocation Bureau.	Cincinnati Board of Education and Community Chest.	a. Supervision of Child Labor; Attendance and Census. b. Psychological examinations for Social Agencies, Public Schools and Juvenile Court.
2. Neurological Clinic of Out - Patient Dispensary, Medical College, University of Cincinnati.	Medical School, University of Cincinnati; Psychiatric Social Service furnished by the Associated Charities.	Offers mental examination to Social Agencies; Supervises parole patients from Longview Hospital for Insane.
3. Psychopathic Institute of the United Jewish Social Agencies.	Community Chest.	Cases referred for observation and mental diagnoses from Social Agencies and private sources.
4. Neuro - Psychiatric Clinic of the Medical Department, United Jewish Social Agencies.	United Jewish Social Agencies (Community Chest.)	Mental examination of cases referred from the General Medical Dispensary of the United Jewish Social Agencies.

The above agencies are the chief facilities offered by Cincinnati for the free examination of mental cases at the present time.

I. VOCATION BUREAU

HISTORY

The first step toward the organization of the Bureau were taken in 1910, but the organization was not completed until 1911. The project was conceived and planned by Miss Edith Campbell, of the Schmidlapp Foundation, Mr. E. N. Clopper, of the National Child Labor Committee and Mrs. Helen T. Wooley. The original plan was to make a thorough study of child labor in Cincinnati. In order to obtain control of the means of investigation, the Bureau took over the School Office which issued employment certificates. In order to have facilities for making mental and physical tests of children the Bureau established a psychological laboratory and department of home visiting and made some provision for investigation of places of employment.

From 1911 until 1915 the activities of the Bureau were confined to the administration of the Employment Certificate Office and the investigation of a group of working children, which included mental and physical tests, home visiting and industrial investigations. A very careful mental and physical study of the working child was made, which included comparison with the children who remained in school.

In 1915 the Placement Office was added. This office attempts to apply the information acquired about the individual child, in adjusting him to industry and in aiding him in his choice of a job.

In 1916 the Psychological Laboratory of the Vocation Bureau took over the task of selecting children from the school system, for assignment to classes for defectives. The Laboratory has since developed into a psychological clinic for the schools and social agencies.

In 1918 the Bureau took over the Scholarship Committee whose purpose was to keep in school bright and promising children who otherwise would be forced into industry too early.

In 1919 the supervision of the psychological testing in the Juvenile Court was assigned to the Bureau. Two members of the Clinical Staff of the Vocation Bureau are assigned to duty in the Juvenile Court.

In 1920 the co-operation of the Court and the Schools was made still closer by the appointing as a member of the staff of the Vocation Bureau an "adjustment officer," whose task it is to take over delinquents of school age guilty of minor delinquencies—and attempt to deal with them as school cases only, thus saving them a Juvenile Court experience and record.

During the same year a department of educational tests and measurements was created—the purpose of which was—by means of group tests to measure the success of teaching of various subjects.

At about the same time a volunteer committee for the supervision of feeble-minded in industry was organized.

Finally in 1920 the Attendance Department of the School was consolidated with the school and made one of its departments.

Organization. At present the Bureau is organized into four departments, each with an assistant director in charge, who is responsible to the director of the Vocation Bureau. These departments are:

1. School Attendance and School Census, with an assistant director in charge, and a staff consisting of one court officer, six field officers and one stenographer.
2. Child Labor and Placement, with assistant director in charge, and four assistants, one stenographer and one clerical worker.
3. Psychological Laboratory, with an assistant director in charge, seven laboratory assistants and examiner, two stenographers and one social investigator.

4. Research and information with director of Vocation Bureau in charge, covers:

Civic and vocational information,
Five-year study comparing working and school children.
Study of observation classes.

SOURCE OF FINANCES

The Vocation Bureau is jointly financed by the Community Chest and the Board of Education.

The budget of the Bureau is divided as follows:

Staff	Community Chest	Board of Education
Director of Bureau.....	.....\$20,000	
Assistant Director in charge Psychological Clinic		
Seven Laboratory Assistants and Examiner.....		
One Clerical worker.....		
\$6,000 for scholarships.....		
Assistant Director in charge Child Labor and Placement .....	.....\$19,880	
Four Assistants		
Three Stenographers		
Five Psychological Laboratory Assistants.....		
One Home Investigator.....		
Supplies and equipment.....		2,500
One Assistant Director in Charge Attendance Department .....	.....\$15,200	
One Court Officer.....		
Five Field Officers.....		
One Stenographer		
Temporary employees for School Census.....		
Supplies and equipment.....		1,750

DEPARTMENTS—PLACEMENT AND CERTIFICATE OFFICE

The Employment Certificate Office has the responsibility of carrying out provisions of the Child Labor Law of the State of Ohio, with regard to all children working in the Cincinnati school district. The law provides at what year a boy or girl may be employed, forbids certain injurious occupations and provides that the child must be in a satisfactory state of health. To make sure that each child complies with these conditions, each applicant must have four credentials—a legal birth record, a certificate showing school record, employer's card giving the name of the employer and kind of employment and a health card signed by a physician of the Board of Health. Boys and girls who have not completed a required grade are considered individually to determine whether or not a work certificate should be issued, on the ground that the child is too inferior mentally to complete the required academic work. These children are tested in the Psychological Laboratory if necessary.

In addition to these legal duties, the Certificate Office helps children to have physical defects corrected to enable them to obtain certificates, endeavors to persuade children to return to school or to continue their education at night school, and refers children of superior intelligence to the Scholarship Committee. Upon the termination of the employment of the child, the certificate must be returned to the issuing office. The child, when he takes another position, must return to the issuing office to have the certificate renewed.

The Placement Office has the function of helping any young person of legal working age who is leaving school to secure employment suited to his training and capacity. This office supervises the work of these children in industry; keeps in touch with employers and keeps a full record of the child's

industrial success or failure. It also makes studies of occupations and consults with employers about their needs for young workers.

SUPERVISION OF THE FEEBLEMINDED IN INDUSTRY

For applicants who are classified as mentally deficient, the Placement Office calls in the services of the Committee on the Supervision of the Feeble-minded in Industry. This committee supervises all children between the ages of 16 and 18 years, going through the Placement Office for jobs, who are known to be feeble-minded. This supervision is carried out through the United Jewish Social Agencies, the Bureau of Catholic Charities and the Associated Charities, the three principal case-working Social Agencies in Cincinnati. The purpose of this supervision are two-fold:

1. Research regarding the feeble-minded in industry.
2. Social supervision of the feeble-minded.

The social agency to whom the case is referred gathers additional information regarding the child, information about the family heredity, and general attempts to adjust the family situation. The Vocation Bureau makes the contact with the employers of these feeble-minded individuals and secures other jobs. The agency supervising the case makes monthly reports to the Vocation Bureau. At present there are 150 feeble-minded individuals under supervision distributed as follows:

Girls	50
Boys	100

PSYCHOLOGICAL LABORATORY

The Psychological Laboratory endeavors to serve the needs of the schools, the Juvenile Court and Social Agencies of the city by giving individual psychological examinations to referred cases. The work of the laboratory for the year from August 31, 1920, to September 1, 1921, is represented by the following table:

Total group examinations.....	12,882
Total individual examinations.....	2,510

SOURCE OF CASES

These cases were referred as follows:

Referring Agency	Number
Attendance Department	25
Placement Office	83
Employment Certificate Office.....	123
Juvenile Court	405
Social Hygiene Society.....	5
Ohio Humane Society.....	15
Associated Charities.....	15
United Jewish Social Agencies	6
Bureau of Catholic Charities.....	1
Children's Home	11
Hospital and Out-Patient Dispensary.....	18
County Board of Health.....	2
Unclassified Social Agencies.....	20
Miscellaneous	37
TOTAL (Referred by Social Agencies).....	771
TOTAL, Referred by Schools.....	1,739
GRAND TOTAL	2,510

CLASSIFICATION OF CASES

These cases were classified as follows:

Classification	Number	Per Cent
Feeble-minded	478	19
Borderline	457	18
Dull Normal	590	23
Average	584	23
Superior	334	13
Unclassified	87	3

DISPOSITION OF CASES

The laboratory gives advice to the agency or school, referring the case, based on the results of the psychological examination. The laboratory is handicapped by the lack of facilities in the way of special classes in the schools. This means that many of the recommendations are not carried out, or are carried out after so much delay that the usefulness of the service is actually lessened. There is always a long waiting list for the special classes. The outlying schools have no special classes and transportation to Special No. 3 (for clearly feeble-minded children) is extremely difficult. There is urgent need for more outlying classes and for more provision centrally.

From September 1, 1920, to August 31, 1921, the following recommendations were made by the laboratory:

No. Recommended	Recommended to
242	Special No. 3 (for Mental Defectives).
60	Observation Classes (Problem cases).
108	Opportunity Classes (Dull and over-age).
26	Exclusion from school.

TYPE OF EXAMINATION

All of the standard psychological tests are given by the Psychological Laboratory, including the Stanford Revision of Binet-Simon, various performance tests, educational tests, any special tests where indicated. Accompanying the child through the Bureau when he is examined is his cumulative record from the school. This record is a complete summary of his school history.

MEDICAL EXAMINATIONS

All children referred from schools come under the provision for medical examinations in the schools. The results of such examinations are supposed to be entered upon the cumulative records and therefore available for use at the Psychological Laboratory when the children come for examination. However, in many cases no examination has been made, or the results have not been entered upon the card. When made, the indications are that it is frequently rapid and cursory. When recommendations are made by the laboratory that medical examinations be given, it is possible to follow out the recommendation only in a small portion of the cases. Where cases stand in especially urgent need of medical attention they are sent to some suitable clinic and the home investigator makes a home visit to arrange for clinical attention.

PSYCHIATRIC SERVICE

Various psychiatrists have volunteered their service to the Bureau for examination of especially referred cases. The following indicates the extent of his service in the year, August 31, 1920, to September 1, 1921.

Number given Psychiatric Examination	348
Per Cent	14

The Psychological Laboratory of the Vocation Bureau recognizes that this is a very unsatisfactory situation, and attempts have been made to have regular

medical service and special psychiatric service provided for in the budget of the Bureau. Up to this point, however, it has not been possible to secure provision for such services.

JUVENILE COURT

The Psychological Laboratory of the Vocation Bureau furnishes the full time services of two psychologists to the Juvenile Court. These two individuals are part of the examining staff of the Psychological Laboratory. The court furnishes them office space and they examine problem cases referred by the probation staff and the judge.

HOME VISITING

Attached to the staff of the laboratory is one person to whom is assigned the duty of making home investigations. Her duties are briefly as follows:

1. Arrangements for transfer from regular schools to Special No. 3 (for the mentally deficient), Opportunity or Observation Classes; visits families to explain to them the reason and necessity for the transfers to these special classes.
2. Visits parents to talk over the possibility of sending their children to State Institutions for the Feeble-minded and Epileptic, where such recommendations have been made by the psychological Laboratory. Accompanies parents to Probate Court and to the train when child leaves.
3. Investigates home conditions where requested by the examining staff to gather further data regarding the heredity, environmental situation as an aid to diagnoses. If necessary cases are referred to Associated Charities and Ohio Humane Society or other special agencies.
4. Persuades parents to take children to clinics for necessary treatment.

The following total represents the work of the home visitor for the period from January 1, 1921, to August 31, 1921:

Visits for Investigation.....	141
Visits for Service or Supervision.....	321
Total	462

EDUCATIONAL MEASUREMENTS

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In addition to the group mental tests that are used in working out educational classifications, educational tests in writing, spelling, arithmetic and other school subjects are given. These tests measure the success of the educational work.

SCHOLARSHIPS

The purpose of the scholarship is to assist capable high school students in completing their high school course. In order to be eligible for one of the scholarships, the child must be of legal working age. A visit is made to the child's home to determine financial ability. In addition a psychological test is given in the Psychological Laboratory to determine whether or not the child is mentally able to benefit from high school training. The case is then presented to the Scholarship Committee which consists of members of the staff of the Vocation Bureau, student consulars in the high school and interested individuals. The scholarships vary from \$25.00 to \$250.00 a year, according to the need of the student. At the present time there are 41 active scholarships amounting to a total of \$776.00 per month.

SCHOOL ATTENDANCE AND CENSUS

The taking of the school census is part of the duty of the assistant director in charge of the Attendance Office. The returns are used to dis-

cover children illegally out of school; to discover handicapped children who need special provision; to check child labor and to serve as a permanent card index to all school children.

The Attendance Department enforces the school attendance law. The attendance officers are trained for their work by a series of Saturday conferences in which all of the organizations which might help in solving difficult problems of children are invited to come and explain the kind of work done and the type of case which should be referred to the organization.

SUMMARY

The Vocation Bureau is of major importance and its achievements are outstanding in the field of mental hygiene in Cincinnati. The supervision of the feeble-minded in industry, the home investigations, the general supervision of the working child are worthy of special note. The activities that have to do with placing children in industry, school attendance, delinquency and the supervision of the feeble-minded are closely related activities, but the Vocation Bureau in Cincinnati is unique in that they are under the same organization.

The psychological examinations would be more effective if they included psychiatric as well as psychological procedures. The Vocation Bureau recognizes the importance of this and has made frequent efforts to increase their psychiatric service. Many children, particularly the marked behavior cases, can only be properly understood and adequately dealt with after a well-rounded and careful medical examination has been made. This can best be secured at a Central Psychiatric Clinic when a period of observation may likewise be available.

A larger staff to handle the supervision of the feeble-minded in industry would seem advisable. An enlarged staff would make it possible for a very much larger number of children who are mentally deficient to be placed under supervision in the community, than at present.

This supervision should be more closely connected with the work of the present social investigator, i. e., the social investigations which are now conducted for aiding in diagnosis would become a part of the general work of supervision of the feeble-minded.

II. THE PSYCHOPATHIC INSTITUTE OF THE UNITED JEWISH SOCIAL AGENCIES

HISTORY

The Psychopathic Institute was opened July 27, 1920. An old residence located near the present Jewish Hospital was taken over. This building which consists of two floors and about 8 rooms, was entirely renovated and remodeled. The capacity is 12 beds (eight free beds and four paid beds).

ORGANIZATION

The staff of the institute is made up of a paid and volunteer personnel. The paid personnel consists of a matron and a maid.

The volunteer group is made up of:

1. The medical group which includes a director, attending house physician, and the entire staff of the Jewish Hospital as consultants.
2. The social group which consists of a psychiatric social worker in charge, with a corps of assistants. In addition a teacher from the public school is assigned for intensive academic work. There is also a teacher in vocational training to bring out special aptitudes.

SOURCE OF FINANCES

The budget for the past year was \$7,200.00 furnished by the Community Chest. This budget is supplemented by the United Jewish Social Agencies.

PLAN AND SCOPE OF WORK

The Psychopathic Institute exists for the observation and diagnoses of maladjusted psychopathic and subnormal children. It is not a treatment agency, but during the period of observation it is the purpose of the staff to give very intensive study of each case in an environment which is as normal and home-like as possible.

NUMBER AND SOURCE OF CASES

Since the establishment of the Psychopathic Institute in July, 1920, 51 cases have been admitted, referred as follows:

Source	Number
Privately referred	11
Pediatrics Department C. G. H.....	2
Bureau of Catholic Charities.....	1
Hamilton County Red Cross.....	1
Juvenile Court	3
Ohio Humane Society.....	2
United Jewish Social Agencies.....	31
TOTAL	51

CLASSIFICATION OF CASES

The above cases were classified as follows:

Classification	Number
Environmental	23
Endocrine	5
Organic	13
Feebleminded	7
Undetermined	3
TOTAL	51

The discharged cases were distributed as follows:

Cured	10
Improved	10
Unimproved	19
TOTAL DISCHARGED	39

TYPE OF EXAMINATIONS

Every case before admittance into the Psychopathic Institute spends 24 hours in the Jewish Hospital, at which time a complete physical examination is made, including blood count, Wasserman, lumbar-puncture (where indicated), urinalysis, X-ray of skull and teeth and other X-rays as indicated. At the institute the examinations are further continued, including eye, teeth, psychological tests, and other specialized tests as indicated. Special effort is made to bring out vocational aptitudes and stimulate special interest on the part of the children. In this connection two afternoons a week are spent at toy making, one afternoon at basketry and Saturday afternoon is given up entirely to recreation. The children attend public school.

SUMMARY

The work of the Psychopathic Institute is of a very careful and intensive type and is of the highest order. But a small number of cases are handled and the most intensive study is given them. The institute exists merely for diagnosis and observation, and has done much to demonstrate the importance of environment, special training and individual study in the treatment of problem children. We believe the institute may best serve as a research

center in developing methods for the study and treatment of the unadjusted and maladjusted child.

It would seem that too small a number of cases have been handled to make it of large service to the city. The total capacity of the institute is but twelve beds, which greatly lessens its ability to serve in the social problems of Cincinnati.

III. NEURO-PSYCHIATRIC CLINIC AT THE UNITED JEWISH SOCIAL AGENCIES

This clinic is a part of the General Medical Dispensary at the United Jewish Social Agencies; it meets two hours a week and examines cases referred by the General Medical Staff at this dispensary. This clinic assists the Case Department of the United Jewish Social Agencies in trying to solve family difficulties, social maladjustments, failure to provide, desertion and other home difficulties. Many of the cases examined at this clinic are referred to the Psychopathic Institute.

IV. NEUROLOGICAL CLINIC OF THE OUT-PATIENT DISPENSARY UNIVERSITY OF CINCINNATI, COLLEGE OF MEDICINE

ORGANIZATION

This clinic meets Wednesday and Friday from 4:00 to 5:00, at the Out-patient Dispensary of the Cincinnati General Hospital. The staff consists of four psychiatrists and a psychiatric social worker.

PLAN AND SCOPE OF WORK

This clinic is a free clinic, examining all types of mental cases referred by agencies, private individuals, and other clinics in the Out-patient Dispensary.

The Associated Charities furnishes the services of a trained psychiatric worker who attends all sessions of this clinic.

The clinic serves as the out-patient department of the Longview Hospital for the Insane. The superintendent of this hospital is a member of the staff of this clinic, and sees paroled patients from Longview during clinic hours. The majority of these paroled patients are not handled as clinic cases. The Associated Charities exercises supervision of these paroled patients through the psychiatric social worker, who is its representative at this clinic.

Three hundred and fifty-eight cases attended the clinic from January 1, 1921, to January 1, 1922.

These cases were referred as follows:

Personal application	184
General Hospital	79
Associated Charities	42
Private physicians	20
Department of Public Welfare.....	3
American Red Cross.....	1
Juvenile Court	4
Vocation Bureau	5
Other clinics	11
Ohio Humane Society.....	1
Other sources	8

TOTAL 358

CONCLUSIONS

When it is seen that 3.5 per cent of all the public school children studied were found to be cases of psychopathic personality, and that fully 6 per cent showed conduct disorders, it can be appreciated how large is the psychiatric

phase of public school work. If we now carefully go over the clinical facilities of this city and note the total number of problem individuals that are receiving well-rounded, thoroughgoing medical, psychiatric, psychological, and social diagnosis, we must be impressed with the fact that even the most urgent needs of the city school children are not being met. One phase of the cost of this may be seen in the expense of the particular group of repeaters among the 4,326 children studied. It will be remembered that 1,685 children repeated 2,250 grades at a cost of approximately \$143,000.

The study of juvenile delinquents in the Juvenile Court showed that the large majority had Intelligence Quotients above 80, and that the question of general intelligence was by no means the important causative factor in the delinquent conduct of these children. It was pointed out that serious mental conflicts and mental maladjustments, many and varied physical disorders, and bad home influences, were the outstanding factors underlying the conduct of these children. These are largely psychiatric problems, and yet only 9 per cent of the cases selected for psychological examination were referred to the psychiatrist.

The immense problem in human salvage presented by the Municipal Court, with its 14,000 cases, (a large proportion of whom are repeated offenders) and the Hamilton County Jail (over half of whose inmates are repeated offenders) is being entirely neglected as far as the physical and mental conditions of these individuals are concerned. None of the clinics in the city are pretending to approach the problem even in the most elementary way. The cost of crime is amazing to those who have the subject presented to them for the first time. The average cost of convicting a person of a felony in the State of New York is \$1,500. The results obtained from this expenditure, in the way of protecting society or of preventing a subsequent criminal career of the individual convicted, are in most cases almost negligible. On the other hand, the average cost of an initial medical, psychological, and social diagnosis of a delinquent individual is less than \$50.00, and the result of such a diagnosis is often the effective management of delinquent trends that, unchecked, are bound to result in a further criminal career. It has been estimated that the cost of crime in the United States is not less than two and one-half million dollars a day. If there could be expended annually in Cincinnati for the study and treatment of offenders a sum equivalent to the cost of crime in this city for one week, results of far-reaching importance to humanity in general, and to Cincinnati in particular, would be obtained.

Of the thousands of cases handled by the various social agencies of this city, only 877 received a mental examination during the last year and a half. And yet we believe, in the light of this study, that fully 75 per cent of all per-being dealt with as cases of dependency, illegitimacy, etc., by the social agencies of Cincinnati, show mental and physical conditions that are the most outstanding factors to be considered in connection with their relief.

The clinical needs presented by the dependent and delinquent institutions, both juvenile and adult, are, as far as the mental condition of the inmates is concerned, hardly being touched.

It would seem that Cincinnati is making, in a small way, splendid efforts in various directions to meet the mental hygiene needs of the city. What does stand out, however, is the fact that in no place do we find that the work is either sufficiently comprehensive or adequately financed to be of the largest measure of service that the opportunities and needs offered would demand. It appears that in several places splendid clinical work is being done. But each piece of work is a unit unto itself, revolving on its own axis, absolutely independent of other activities.

This is the weakness in the whole situation as we see it. There is an urgent need for a large central psychiatric clinic that will coordinate all work in this direction in the city; that will serve in an effective way the general community, the social agencies, the delinquent and dependent insti-

tutions, the juvenile and adult courts, and, finally, the public schools in helping them to deal with their problem cases.

We believe that the main issues brought out in this report can be met only through the establishment of such a clinic.

To this clinic would come voluntarily, from the homes of Cincinnati, early and mild mental cases for diagnosis, advice, and treatment; this at a period long before the individual could be considered committable as insane, and at a time when he may possibly be restored to mental health.

To this clinic would be brought problems of dependency, unemployment, illegitimacy, etc., from the various social agencies for careful study, advice and treatment.

To this clinic should come serious behavior problems of the public schools. There should be a close relationship between the psychological department of the Vocation Bureau, and the proposed psychiatric clinic. The former should be used as an important outpost—a clearing house—through which all problem children in the public schools would pass. In this way there would be continually sent back from the Vocation Bureau to the psychiatric clinic, for well-rounded study, observation, and treatment, all cases that could not be dealt with satisfactorily at the "front." It would seem desirable to have the psychologist of the Bureau a member of the staff of the clinic.

From the clinic should go a "flying team" to serve the Municipal Court, the County Jail, and various dependent and delinquent institutions.

It cannot be stressed too strongly that this clinic should not be merely a classification clinic—a place to give an individual a certain Latin designation and tag him with some sort of a diagnosis. It should be largely a treatment clinic, which, through its social service department, would work out in co-operation with the social workers connected with the various social agencies, with the probation officers in the courts, and with the supervisors of the problem school children, a well-planned program for the treatment and adjustment of each individual brought to the clinic for study.

The proper organization and personnel of the clinic is essential to its future success. This is fundamentally a medical problem and should be dealt with chiefly as such. The clinic should be a part of the clinical facilities of the General Hospital.

The director of the clinic should be a full-time man. He should be a physician with ample clinical experience, who has specialized in psychiatry, with special reference to the social phases of the problem, who has had special training in psychology, sociology, and in social work, and who is particularly well acquainted with the application of these sciences to the problems of delinquency, dependency, public health, industry and education.

The clinic should have an intimate contact with the General Hospital and the University. The training of medical men in clinical psychiatry and in mental hygiene is one of the greatest needs in medicine today. No small amount of chronic invalidism amongst the patients that fill physician's offices, is due to the ignorance of doctors about psychiatry. This ignorance is also one of the main reasons why quackery flourishes.

Finally, when we realize that mental disease is in a large measure preventable, and that no other person has the opportunity that the physician has of coming in contact with early and mild cases at a time when treatment and prevention are possible, we can appreciate how important is the training of young medical students in psychiatry.

Of just as much importance, possibly of even greater importance, is the training of future school teachers along mental hygiene lines. Courses giving the principles of mental health and the fundamentals of mental hygiene, should be part of the training of every student preparing for the teaching profession.

We can readily see how important a role the public school teacher plays in the mental health of the nation, if we remember that the first evidences of criminal conduct and of mental disease show themselves in childhood. A proper understanding upon the part of those who come daily in contact with

the maladjusted child of the full import of unhealthy adjustments, may serve to prevent later shipwreck.

Most persons are fully convinced that any fundamental change in our procedure of dealing with criminals in court, must come about through the training of future lawyers and judges in our law schools. All of the accumulated fund of knowledge about the causes for criminal conduct and the individuals who commit crime, is as yet an uncharted sea for the majority of our law schools.

It can be seen, then, that the director of this clinic, which will serve the city in connection with its problems of mental disease and mental defect, juvenile delinquency, adult crime, dependency, and the like, should be part of the teaching staff of the University. He should be a professor of psychiatry, and should give courses of lectures in the medical schools, in the law schools, and in connection with the training of school teachers and social workers.

RECOMMENDATIONS

1. The most important issue presented in this report, in our belief, is the need for a Central Psychiatric Clinic, which will serve the social agencies, courts and institutions of Cincinnati in studying, advising and treating the large number of mentally handicapped persons who provide us with the apparently unimprovable cases of delinquency and dependency; which will serve the public schools in the study and treatment of psychopathic children, and the problem cases of mental maladjustment and conduct disorders which are daily coming to the attention of public school authorities; and finally, which will serve the general community, the mentally sick and maladjusted persons in the homes of Cincinnati, who, if not properly understood and given suitable treatment today, will provide us with next year's cases at Longview and various private sanitarium.

2. The director of the psychiatric clinic should be professor of psychiatry and mental hygiene in the Medical College. Laying aside the issues of insanity, mental defect and epilepsy, all of which are so important to consider in connection with a course in psychiatry in the medical school, there are other conditions more numerous and more fundamental that are to be thought of in the training of medical students. Every case with which the physician has to deal is a problem in mental adjustment; the mental attitude of the patient, his adaptation to his own individual problems and to those presented by his environment, is an all important question in his permanent recovery. We have mentioned before the large flock of psychoneurotic individuals and mental invalids who fill doctor's offices, and who supply quacks with a means of sustenance. These conditions are due in large measure to the ignorance of physicians concerning psychiatry and the most elementary principles of mental hygiene.

There is a growing demand throughout the country which cannot be filled by the graduates of our medical schools or by members of the staffs of our state hospitals for the insane, and that is for physicians trained in the field of social psychiatry and mental hygiene, who can undertake work in connection with clinics in juvenile and adult courts and in public schools. This demand is very great at present and there are practically no men trained to do the work. The next few years will see an immense development along these lines, for public-school officials, judges, institution authorities and heads of organized social agencies throughout this country are calling more and more for assistance in this direction. It is not enough to be able to say whether a criminal or a dependent is insane or mentally defective. The large proportion are neither. The public is now demanding that the sciences of psychiatry and psychology be applied to the problems of delinquency and dependency as such; enough is already known of the causes of human failure through the contributions of these two sciences to justify such a demand.

The training of medical students in the University along these lines should certainly be a fundamental part of the medical school's curriculum, this train-

ing to consist not only of lectures in the University, but of practical work in the clinic.

3. Real supervision of mentally defective children is urgently needed. This should be extended to cover the after-care of psychopathic and epileptic children, the last two named to be supervised in connection with the proposed psychiatric clinic; but the actual work of supervision to be conducted by the Vocation Bureau. This type of work—the supervision of defective, psychopathic and epileptic children—requires full-time, well paid social workers. These individuals should have training along psychiatric lines; for the service is of the most expert kind, requiring an appreciation and knowledge of the limitations as well as the abilities of these children.

4. Extending further the splendid facilities of the Vocation Bureau, for the particular type of work that this organization is doing for the public school system of Cincinnati.

5. Increased and continuing support of the special-class facilities in the public schools. The public school system cannot be praised too highly for its work in this direction. More stress should be laid on industrial and vocational training of mental defectives than is now being done. The equipment along these lines is inadequate; a small financial outlay in fitting the defective child for a job in life is real economy.

6. This survey shows that the children at the two Opportunity Farms are largely a selected group, handicapped in a great many instances by serious mental and physical conditions. It is clear from this study that these children are not able to profit by measures ordinarily used in training normal persons. The problem presented from an educational point of view is to fit these individuals for something useful in life, to equip them with the sort of training that will enable them to secure, and hold, a job and support themselves.

More should be made of this phase of work in both institutions. We recommend the placing of the two Opportunity Farms under the administrative control of the Board of Education. All of the problem children in these two delinquent institutions, particularly the psychopathic boys and girls, should receive the most intensive and thorough-going study by the staff of the central psychiatric clinic. The treatment and training of these particular children should be based upon the findings of the clinic in each case.

7. Great progress has been made in handling first offenders and misdemeanants through the development of adult probation. We will not endeavor to go into this matter except to state that, in some parts of this country, courts have found that many offenders may be handled safely out in the community and thus the cost of their support in institutions be completely saved, to say nothing of the reclaiming, in many instances, of the individual himself.

In Massachusetts every court is compelled by law to have a probation officer. This work is growing to such an extent in that state that the great majority of all offenders are now being handled by other than institutional measures. The judges of the Municipal Court of Cincinnati should be supplied with an ample number of probation officers to serve that court.

8. Any permanently successful endeavor, no matter how worthy, must ultimately be based upon public education. This is particularly true in the field of mental hygiene. The subject consists of a mass of knowledge with which as yet the general public is entirely unacquainted. There is also a vast amount of misinformation that must be uprooted before any real progress can be made in preventing insanity, mental defect, epilepsy and the mental factors involved in delinquency, dependency and human failure, or in maintaining mental health in otherwise normal persons.

There is an urgent need of a continuing service, along educational lines, of the general public as to this phase of health work. Such service can best be accomplished through the organization of a mental hygiene committee or society that will carry on an educational campaign, hold public conferences, present exhibits, distribute mental hygiene literature, and bring to bear upon

public authorities a sound influence pertaining to measures that come within the scope of mental hygiene work. A Mental Hygiene Council of the Public Health Federation has already been established to serve this purpose. Its work should be continued and adequately financed.

EDUCATIONAL NEEDS WHICH SHOULD, IN THE FUTURE, ULTIMATELY BE MET

(a) If the most important element in the prevention of crime, dependency, mental breakdowns and human failures is to be found in the early recognition and individual training and treatment of the unadjusted and maladjusted school child, then the part that the school teacher has to play in the mental health of the nation is, next to that of the parents, probably the most important. Training the special-class teachers and special-class supervisors in the University is essential. The present training should be supplemented by systematic courses in mental hygiene. This can only be done by those who are intimately acquainted with the problems of mental defect and other mental conditions. The director of the proposed psychiatric clinic should be professor of psychiatry in the University and should conduct courses along mental hygiene lines. To all individuals who expect to take up teaching as a profession, courses should be given dealing with the fundamental principles of mental hygiene, and here we are not referring so much to the question of special-class training, as we are to the general problems of mental health, with which every teacher should be well acquainted if she is to play the part that she should play in the proper conservation of the mental health of children.

We have pointed out frequently through the entire report how the beginnings of adult failures are noticeable very early in the public school child. The important thing to stress is that these children in a large measure can be adjusted and developed into successful and happy men and women. The part the teacher has to play in this is of the first consideration.

A responsibility rests on the shoulders of the University authorities to prepare teachers along these lines.

(b) There is a growing tendency towards individualization in social work. Almost all case working agencies are now stressing the value of training in psychiatric social work. Many persons have begun to feel that in our dealing with general social problems, we have been in the habit of overlooking the most important element in the whole situation, and that is the individual himself, with whom we are dealing as a dependent or a delinquent or as a case needing some sort of social interference. So it has come about that various colleges and universities in this country have developed courses in psychiatric social work. The demand for persons trained along these lines far exceeds the supply. State hospitals for the insane, the American Red Cross, psychopathic hospitals, psychiatric clinics, clinics in courts, in public schools, and institutions dealing with delinquent individuals, as well as probation departments in courts and various social agencies are seeking the services of psychiatric social workers.

It is recommended that the University develop such a school in psychiatric social work, and that the director of the proposed clinic, assisted by the chief psychiatric social worker of the clinic be charged with the duty of conducting the courses in such a school.

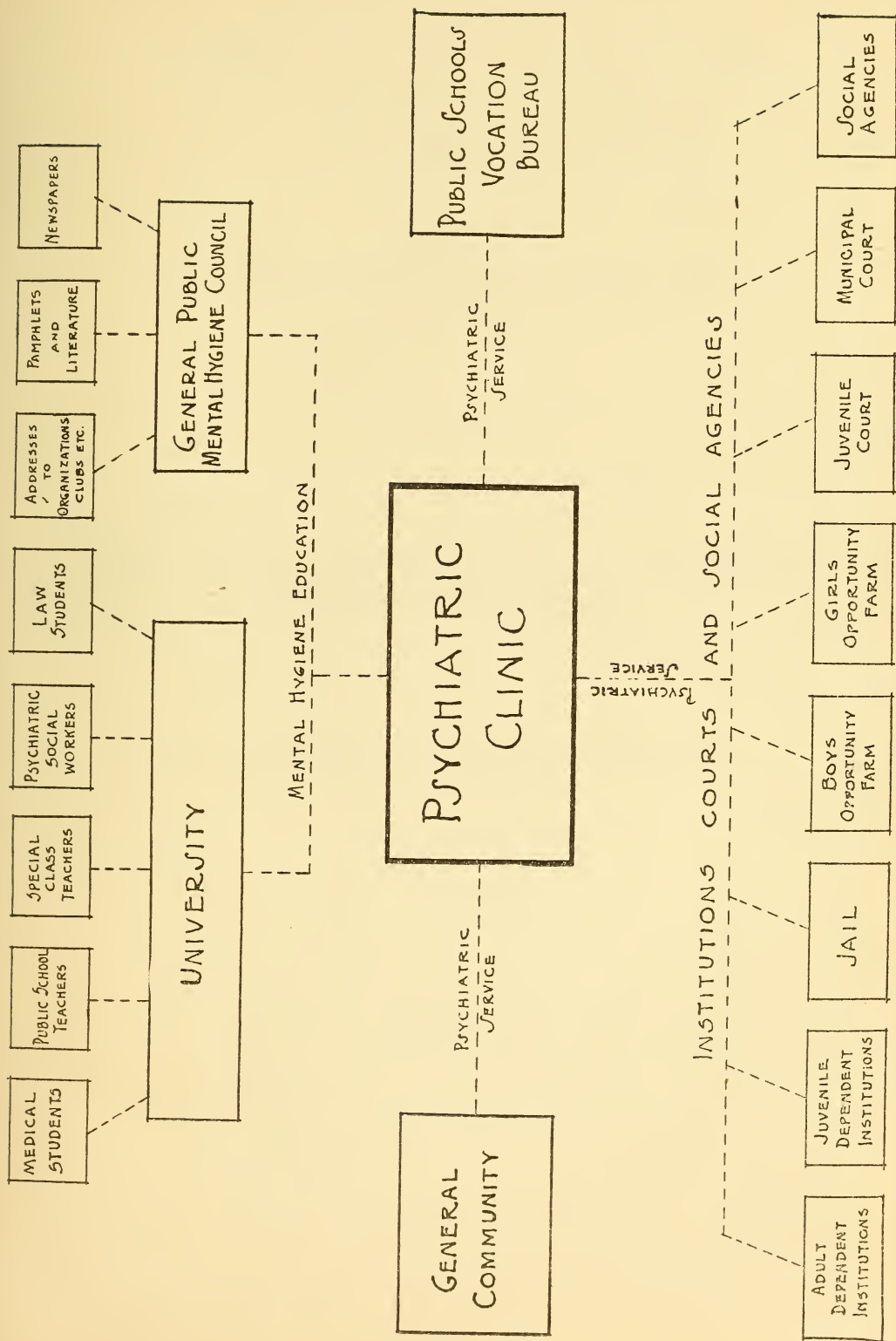
Note.—It may be added here that the amount of teaching referred to upon the part of the director of the clinic would hardly be noticed in the routine of his general work, not requiring, all told, more than two to four hours a week.

(c) That phase of this report dealing with the subject of delinquency has brought out some very significant facts concerning criminals and the prevention of crime. We have suggested a program that has its basis in the study of criminals and their treatment rather than punishment. In this way insane, mentally defective and grossly handicapped prisoners

would not be found in court time and time again, serving repeated sentences in institutions, but would be committed to those institutions and hospitals best suited to their particular needs. Such a program, we believe, would make great strides in the prevention of recidivism (repeated criminal conduct).

The disposition of criminals and the protection of the public from their depredations is largely in the hands of the courts. Judges should be familiar with the facts concerning mental defect, epilepsy, insanity, and other mental conditions which are determining factors in criminal conduct. They should be taught in the law schools that in the case of each individual offender who appears in court, there are many other, and probably more important considerations, involved than the purely legal questions; considerations that have everything to do with explaining why a particular individual commits a criminal act, and above all in explaining how best society may be protected from a future repetition of such conduct.

Courses in the law school dealing with the subjects of delinquency and the psychopathology of crime should be conducted by the professor of psychiatry and mental hygiene. Any real progress in attacking this problem at its very source in the courts must depend upon the education of future judges.



PART II
STUDY OF THE FEEBLEMINDED

Study of the Careers of 322 Feeble-minded
Persons in Cincinnati

AND
A State Mental Hygiene Program

V. V. Anderson, M. D.
Flora May Fearing

A STUDY OF THE CAREERS OF 322 FEEBLEMINDED PERSONS

The object of this study was to determine what happens to mental defectives after they leave the public schools and go out into the community to earn a living. It was hoped that this information showing why some fail and some succeed in adjusting themselves to the conditions of normal life in the community, together with the facts obtained from our study of several thousand public school children, dependents coming in contact with social agencies, paupers in city and county homes, delinquents in courts and institutions in Cincinnati and Hamilton County, would enable us to map out a comprehensive state program for dealing with feeble-mindedness.

Most of the information on the subject and most of the resulting legislation have been based on generalizations from studies of striking failures, such as feeble-minded criminals, feeble-minded vagrants, feeble-minded prostitutes, and feeble-minded dependents. If the careers of these human derelicts are fairly representative of mental defectives as a whole; if the disheartening, depressing picture they paint tells the entire story, then only one thing remains to be done and that is to segregate all of them for life.

But even this is not so simple as it seems. If we bear in mind that approximately one per cent of the general population is mentally defective and that the army figures showed that mental defect was three times as frequent as insanity in the army of three million men, we may begin to appreciate the size of the problem. The cost of maintaining all of these individuals in state institutions makes such a program prohibitive. It is not believed any legislature would undertake so vast an appropriation of public funds.

But then the question arises, is it all necessary; are all feeble-minded persons vicious, immoral, dependent, delinquent, and prolific in reproducing themselves? If not, what are the facts? As it is, we must, from the very nature of the case, select some more feasible program than segregation of all mental defectives.

We have then set out to determine if many generalizations about feeble-mindedness will hold water. In the first place we have found that two per cent of the public school children are mentally defective, and that mental defectives in large numbers furnish us with unimprovable cases of dependency and delinquency; but not all mentally defective school children become dependents or delinquents, prostitutes or vagrants. In the light of these facts we wished to know then why some feeble-minded children become a menace to the general public and furnish some of the most serious cases with which our social agencies and institutions have to deal, while others seem never to give any trouble and become decent, respectable, self-supporting citizens. We believed that only with such information at hand would it be possible to plan an intelligent and comprehensive state program for dealing adequately with the question. For this purpose two groups were chosen for study. The first group consists of 201 ex-students of special classes for mental defectives in Cincinnati. These individuals had been made the subject of an investigation in 1918. At that time the histories of all children enrolled in classes for defectives in Cincinnati who had been out of school for as much as a year were studied. The results were published by Helen T. Woolley and Hornell Hart in Vol. I., Number 7, Studies from the Helen S. Trownstine Foundation.

At that time there were 203 such children. The intention from the first had been to send only definitely feeble-minded children to the Special Schools. Before the establishment of the Vocation Bureau, however, there were inade-

quate facilities for examination and diagnosis and many were selected largely on the basis of the judgment of the teacher. This resulted in some being included in the group who were not feeble-minded and others being sent because of special defects, chorea, etc. The group as a whole, however, can in all justice be called "defective." For this group the findings resulting from the previous study covered the following points:

Mental, Educational, and Social Status, including relation of mental age and chronological age, length of stay in special school, family records with Social Agencies, social maladjustments noted in the family.

History after leaving school, including use of leisure time, delinquency, social and economic status, analyses of special groups—individuals living at home, individuals in institutions, individuals who married.

Industrial record, including amount earned, length of time in positions, type of work.

The chief purpose of this former study was to evaluate the training received in the special classes provided for the mental defectives in Cincinnati. Had they gained in personal resources as well as in industrial efficiency from such training; how should future educational policy for such individuals be modified?

For the present study, the same cases were taken and much of the material secured in the former investigation was transcribed on our statistical sheets. An effort was made to bring to date the histories of these individuals and to add some special studies not attempted before. At present the ages ranged from 18 to 30, the median chronological age being 22.2 years, so that the facts should be more far-reaching as the amount of time that has elapsed may be considered to be a fair tryout.

The second group consists of 121 individuals who had been diagnosed as feeble-minded by the Vocation Bureau during the years 1917-1919. At the time of examination they presented no particular maladjustments other than school retardation. Their examination had been requested by either the work certificate office or the placement office or school principal or social agencies. At present they are all out of school and in the community. In most cases no attempt has ever been made at supervision. No social investigations had ever been made of these cases. Their ages now would be between 16 and 22 years.

TWO HUNDRED AND ONE EX-STUDENTS OF SPECIAL CLASSES FOR DEFECTIVES

GENERAL DATA

In 1918, 203 cases of ex-students of special classes for defectives in Cincinnati had been studied by Dr. Helen Woolley. During the three years when no work was done on these cases, two of the original sheets of data were lost. This meant that for our investigation there were but 201 individuals. All of these had been out of school for at least four years. Many of them for a much longer period.

Of the whole group studied, 188 or 93.5 per cent were found to be native-born, 161 or 80.1 per cent of native parents; 8 or 4 per cent were foreign-born. For five individuals it was impossible to secure information on this point. Nine or 4.5 per cent were negroes. The whole group is thus made up very largely of native-born individuals; language difficulty and inability to adapt themselves to American social environment, therefore, being a factor only in a negligible number of cases. This homogeneity makes the data on the industrial history of these individuals much more significant. All but eight are native-born and all but nine are white.

When actual investigation was begun it was found that eight had died since leaving school; three had been definitely diagnosed as psychotic. There were six individuals who had had later psychological examinations and were diagnosed as not feeble-minded. These 17 cases were automatically eliminated from this study of the feeble-minded out in the community. When the whole study was finally brought to an end, two of the women had not been located. No clue as to the whereabouts of either the individual or of any member of the family had been found. There were also five individuals about whom insufficient data were gathered to make practicable their inclusion in this study. There were in all, therefore, 24 cases eliminated, leaving a total of 177 feeble-minded individuals whose histories since they left school were intensively studied.

Of the final number studied, it was found that 113 or 63.8 per cent were men, and 64 or 36.2 per cent were women.

Twenty-six of the women and 15 of the men have been married.

The 26 married women had 39 children. Two had no children, 13 have one child each, 3 have two children, 1 has four, and 2 have eight. The two who have no children were both married less than five months before they were interviewed for this investigation. Two of those who have had only one child were sterilized at the time of the birth of an illegitimate child. Ten of these women have been sexually promiscuous, and five others have had illicit relations with at least one man. Six were pregnant when married.

The five girls who in the 1918 study had had illegitimate children are now married. In the whole group no other case of illegitimacy has occurred in the last three years.

A study was made as to the location of these 177 individuals—whether in industry, or in institutions, or at home—not working. The present location for the total number, and for the men and women separately, is given in the following table.

TABLE 1—PRESENT LOCATION

LOCATION	Males		Females		Total	
	Number	Per Cent	Number	Per Cent	Number	Per Cent
Institution	9	8.0	6	9.4	15	8.5
At home, never worked	5	4.4	21	32.8	26	14.7
At home, previous industrial record	15	13.3	26	40.6	41	23.2
Working for relatives.	11	9.7	..	...	11	6.2
In industry	65	57.5	11	17.2	76	42.9
Army or Navy	8	7.1	..	...	8	4.5
Total,	113	100.0	64	100.0	177	100.0

Fifty-three and six-tenths per cent of the group are gainfully employed either in industry, in the Army or Navy, or working for relatives. From the above table it will be seen that only 17.7 per cent of the men are unemployed and at home; while 73.4 per cent of the women are not at present employed outside of their homes. Over half of the women (57.8 per cent), however, have been in industry at some time. Seventy-seven per cent of the white persons have had industrial records.

INSTITUTION CASES

Of the whole group there are now in institutions 15 individuals—nine men and six women. In 1918, 24 were in institutions—five in correctional institutions, and nineteen in institutions for mental defectives. During the three years that elapsed between the two investigations, one boy returned from Vineland, enlisted in the army, was discharged because of mental

deficiency, and is now at home, a member of a "pension family" of one of the social agencies. Another boy returned from Woodbine, the New Jersey Agricultural School, had a serious delinquent record and is now dead—killed when he attempted highway robbery. The five who were in various institutions for delinquents have all been released and, while in two cases there has been further delinquency, it was not of so serious a nature as to result in recommitment. Several who were in the State Institution for the Feeble-minded at Columbus are now at home, incapable of industrial activity, but in no case a problem to the community. Two low-grade defectives are now on parole from Longview Hospital for the Insane.

For the 15 individuals now in an institution, the ages range from 18 to 25. With two exceptions they were all placed in an institution for mental defectives within two years after leaving school. The number of years they have been in institutions varies from one to ten, the largest number having been in six years.

An attempt was made to give them special training in school. Upon leaving school all except two failed almost immediately to make a social adjustment and they were placed in state or private institutions. Many of them were very low grade mental defectives, in seven cases the Intelligence Quotient being less than 50. They are not now, and have never been for any considerable period of time, out in the community, and are, therefore, of no further interest in this study. The two remaining cases are of two girls now at the State Institution for the Feeble-minded, who were not sent there until, in the one case 4 years and in the other case 6 years had elapsed after leaving the Special School for Defectives. Both give interesting histories of how disastrous it is for certain types of feeble-minded individuals to be left out in the community.

THE CASE OF DELLE

First year after leaving school. Worked for a few weeks at three different jobs. Never earned more than \$6 a week.

Second year. Married when 16. Pregnant at time of marriage.

Third year. Child found by officer of Ohio Humane Society dying of neglect, naked, half starved and bruised. Action instituted to have Delle committed to State Institution for the Feeble-minded was opposed by husband and dismissed by court.

Fourth year. Ohio Humane Society again attempted to secure commitment and was again unsuccessful.

Fifth year. Second child born. Husband, probably a mental defective, began to mistreat Delle.

Sixth year. Worked for a few weeks for \$5 a week. Husband failed to support her and the child. Third unsuccessful attempt made to secure commitment. Child had to be taken from her because of neglect. Action was brought a fourth time in the court and commitment was at last secured.

The case had been handled for four years by a social agency. Every possible means of securing a social adjustment had been attempted. The court three times refused to take her out of the community, yet she was incapable of caring for herself or her children. One brother had been at the State Institution for the Feeble-minded since he was nine years old. One sister and another brother are definitely feeble-minded. The family live in the most squalid of tenements. There is every reason to suppose that had not the officials of one social agency kept persistently on the case she would have been allowed to remain indefinitely in the community, giving birth to defective children for whom she was incapable of caring. Delle was not only feeble-minded but suffered markedly from personality difficulties. She was indolent, sluggish, weak-willed and suggestible.

THE CASE OF NETTIE

First year after leaving school. Brought into Juvenile Court as a sex delinquent. Placed in Convent of the Good Shepherd.

Second and third years. Held two short time positions. Never earned more than \$7. Was going constantly with one man but did not marry him.

Fourth year. Worked at a "hotel" and became a "known" prostitute. A septic abortion

resulted in her being sent to the City Hospital. Commitment proceedings were instituted by the Hospital Social Service and she was transferred to the State Institution for the Feebleminded at Columbus.

Four years before Nettie had been definitely diagnosed as mentally defective, and within one year after leaving school she became a sex delinquent. At no time did she learn to read or write. She was a constant truant during her school days. The teachers reported before she left school that they had every reason to suppose she was guilty of sex offenses. Everything in her history indicated the necessity of institutional care or the most constant supervision if she were to remain in the community. Her friends at the "hotel" when interviewed still grieved, however, because she "got sick" and had been sent "up state."

INDIVIDUALS NOW GAINFULLY EMPLOYED

Of the 177 individuals who were made the basis of this study, 87 or 49.1 per cent were found out in industry or were working for relatives. There were 41 others who, while not employed at the present time, had previous industrial records. In the 1918 study, these two groups were combined. Such marked differences, however, were apparent from our analysis of the industry history of the two groups that they were studied separately and will be contrasted rather than combined.

In such an investigation as this in which light has been sought on the much befogged question of what should be done with the feebleminded individuals who are turned out from our schools, interest centers around those who are making a living and have apparently made a social adjustment. All too frequently the correct application of the term "feebleminded" is deemed sufficient identification. It is forgotten that mental defectives differ as widely one from another as do normal individuals. Some have serious personality handicaps, others have none; some come from advantageous social surroundings, some from environments which are in themselves tremendous handicaps. It is to be expected, therefore, that even as among normal individuals some will "make good" and some will not.

An attempt has been made, therefore, not only to study the industrial history of the group as a whole, but to endeavor to determine what factors have made for the success of certain individuals and for the failure of others.

Information in regard to industrial history was secured in some cases from the Placement Office and the Work Certificate Office of the Cincinnati Vocation Bureau. Chief reliance, however, for this group of individuals who had been out of school for five or six years, had to be placed upon information secured from the individuals themselves or from their parents. With but few exceptions, at least one employer was interviewed to verify the statements in regard to wages, length of service and to give definite information in regard to the dependability and general work history of the individual.

Of the 87 individuals now gainfully employed in industry, information in regard to wages, which could be used statistically was secured for only 69. Eleven are now working for relatives, and though the amounts paid them are known, it was felt unwise to include these wages with those paid by industrial concerns; others are now working in other cities, and relatives, when interviewed, could not give trustworthy information. The median wage for these 69 cases is \$15.08. The amounts paid vary from \$5 a week to \$37 a week. Over one-third are now receiving between \$10 and \$15 a week; while approximately 50 per cent are receiving wages of more than \$15 a week.

TABLE II—SCHOOL RETARDATION

RETARDATION	MALES		FEMALES		TOTAL	
	Number	Per Cent	Number	Per Cent	Number	Per Cent
Retarded 1 year.....	30	27.5	5	10.4	35	22.3
None	33	30.3	9	18.7	42	26.8
Retarded 2 years....	27	24.8	18	37.5	45	28.7
Retarded 3 years....	11	10.1	8	16.7	19	12.1
Retarded 4 years....	7	6.4	4	8.3	11	7.0
Retarded 5 years....	1	.9	3	6.2	4	2.5
Retarded 6 years....	..	....	..	....	..	....
Retarded 7 years....	..	....	1	2.1	1	0.6
TOTAL	109	100.0	48	100.0	157	100.0

Dividing the cases according to those who have, and those who have not, character defects and handicaps of personality, we find that the median wage for those with no personality difficulties is \$17.50 per week; while for those with personality difficulties the wage is \$12.85.

TABLE III—BEHAVIOR HISTORY

BEHAVIOR	BOTH		MALES		FEMALES	
	Number	Per Cent	Number	Per Cent	Number	Per Cent
No outstanding Behavior Difficulties..	29	18.5	24	22.1	5	10.4
Stealing	44	28.1	42	38.5	2	4.2
Pugnacity	15	9.5	12	11.0	3	6.2
Sex delinquency.....	25	15.9	..	....	25	52.1
Sex perversion.....	5	3.2	5	4.6	..	....
Lying	7	4.4	4	3.7	3	6.2
Incorrigible	7	4.4	2	1.8	5	10.4
Gambling	2	1.3	2	1.8	..	....
Truancy	18	11.5	14	12.8	4	8.3
Vagrancy	5	3.2	4	3.7	1	2.1
TOTAL	157	100.0	109	100.0	48	100.0

LENGTH OF TIME IN ONE JOB

Information sufficiently accurate to be used statistically was obtained in 72 cases, on the length of time that had been spent in the various positions held.

TABLE IV—LENGTH OF TIME IN ONE JOB FOR 72 OF THOSE NOW IN INDUSTRY

TIME	In Present Job		Average Time	
	Number	Per cent	Number	Per cent
1—5 months	18	25.0	17	23.6
6—11 months	12	16.7	14	19.4
12—17 months	9	12.5	10	13.9
18—23 months	4	5.6	9	12.5
24—35 months	13	18.1	8	11.1
36 months and over	16	22.2	14	19.4
Total,	72	100.0	72	100.0

Fifty-eight and four-tenths per cent of these individuals have been in one position for more than a year, while 40.3 per cent have held their present position more than two years, and 22.2 per cent have held their position three years or more.

Those individuals who are handicapped by some difficulty of personality are more likely to lose their positions, or to remain a shorter period in one

place of employment, than those who are not so handicapped. The median number of months in the present job for those without personality difficulties is 19.5 months, for those with personality difficulties is twelve months.

TYPE OF WORK

A wide variety of occupations appears from the study of what these individuals are now doing (factory work, machinist, day laborer, driver, structural iron worker, helper on wagons, auto mechanic, painter, news vender, farmer, errand boy and salesman) six were engaged in construction work, eight as machinists, 27 are working in factories, three as salesmen, 21 are employed at odd jobs, and the remainder are working as apprentices, farmers and clerks.

SEX AND RACE AND INDUSTRIAL HISTORY

There are at present, no colored women in this group employed in industry. There are four colored men who are employed at unskilled labor. One is a day-laborer and three do odd jobs. One of these individuals has been employed as a helper on a wagon for 22 months, and he earns \$10 a week.

Nine of the 11 women out in industry are employed in factories, one is a filing clerk and one does kitchen work.

The median present wage for the women is \$12.50 per week; while that for the men is \$15.50.

THOSE WHO HAD A PREVIOUS INDUSTRIAL HISTORY BUT ARE AT PRESENT UNEMPLOYED

In all there are 41 individuals who now are at home, but who have previously been out in industry—15 are men, and 26 are women. The reasons which they give for being at home are varied. Eight of the women stopped work when they married, six stopped before the birth of their first child; 21 individuals (men and women) are simply "out of work;" while six men are now in the army.

In general these individuals received poorer wages, and remained shorter periods of time in positions, than the group who are now in industry.

TABLE V—WAGES RECEIVED OF 69 OF THOSE NOW IN INDUSTRY AND OF 37 OF THOSE PREVIOUSLY EMPLOYED

Amount per Week	Those now in industry		Previously employed	
	Last Wage		Average Wage	
\$ 1 to \$ 4 .....	..	4	..	3
5 to 9	9	13	15	19
10 to 14	25	10	29	9
15 to 19	13	5	14	5
20 to 24	12	2	7	1
25 and over.....	10	3	4	..
TOTAL	69	37	69	37

The average wage for these two groups presents interesting comparisons. Sixty per cent of those now at home and unemployed but who have previously been employed, averaged less than \$10 a week when they were employed; while approximately 50 per cent of those now in industry average more than \$15 a week.

Eighty-six per cent of those who are now at home, but who have had a previous industrial career, averaged less than a year in the jobs which they held; while the majority of those now in industry, 58.4 per cent, have averaged more than a year per job.

THOSE AT HOME WHO NEVER WORKED

There are 21 women and five men who have never worked outside of the home. They fall immediately into two groups. First, those with so low a grade of intelligence—imbeciles and idiots—that they are incapable of employment, no matter how great the economic need; and second, those who come from homes where there has been no urge to go out into industry, where they have led quiet, and uneventful lives, surrounded by a fair degree of comfort.

Very few of these individuals have given evidence of any serious behavior difficulties. With one or two exceptions they have presented no real social problems.

COURT AND INSTITUTIONAL RECORD

It will be remembered that of the 177 cases included in this study, 15 were in institutions for the feeble-minded. This leaves 162 for whom a special study was made as to any evidence of delinquency.

Only 36 individuals (22.2 per cent) have court or institutional records (correctional). This certainly does not indicate that the majority of feeble-minded children are liable to become criminals, even if not supervised. It seems as if we will have to revise our conception as to the meanness and viciousness of feeble-minded persons. It may be interesting to note that practically all of the individuals who had a delinquent record were likewise handicapped by personality difficulties and character defects. It is our belief that we need to know more about a person than the mere fact that he is feeble-minded, if we are going to make any predictions as to his conduct later on in life. This study is but in keeping with our experience from other investigations, that by far the largest factor in delinquent behavior, as far as the individual's make-up is concerned, is not to be found in his degree of intelligence but in his character and personality.

A STUDY OF THE HOMES

HOME INDEX

It will be remembered from our former study of problem school children and juvenile delinquents, that in our social investigations of the home we endeavored to evaluate certain factors and give a final index. If the index was 20 or over, we felt that the general conditions were very favorable for the best interests of the individual; 18 was found to most frequently represent the typical middle-class home; an index below 13 indicates unfavorable home conditions; while an index of nine or below represented a very low social level.

The distribution of the indices given for 136 homes investigated is as follows:

TABLE VI—DISTRIBUTION OF 136 HOME INDICES

Index	Number	Per Cent
21-24	9	6.6
17-20	34	25.0
13-16	37	27.2
9-12	37	27.2
5- 8	19	14.0
TOTAL	136	100.0

Thirty-one and six-tenths per cent of these individuals live in homes which grade 17 or above—that is in good middle-class homes or even better; 41.2 per cent, however, live in homes which grade 12 or below and offer distinctly unfavorable surroundings; 14 per cent live in the very lowest grade homes.

The chief failure in the homes of these individuals was found in parental conditions. Twenty-three per cent received the very lowest possible score on this item. The general intelligence, social adaptability and harmony between the parents received the very lowest rating. Thirty per cent of these mental

defectives have little or no parental supervision or control. One-third of the homes are too crowded for even a fair degree of comfort and privacy. Eight families were found in actual destitution.

NEIGHBORHOOD INDEX

Each neighborhood visited was scored in the same way as were the homes. The distribution of these values for the whole group is given below:

TABLE VII—DISTRIBUTION OF NEIGHBORHOOD INDICES
FOR 146 HOMES

Index	Number	Per Cent
21-25	22	15.1
17-20	25	17.1
13-16	72	49.3
9-12	19	13.0
5- 8	8	5.5
TOTAL.....	146	100.0

Nearly half of the cases live in neighborhoods scoring between 12 and 17. Such an index indicates a fairly favorable neighborhood environment.

CONTACT WITH SOCIAL AGENCIES

All cases were cleared with the Confidential Exchange. The records of the social agencies registered were read and a study was made of the registrations.

While our former conclusion was that the feeble-minded individual is not as bad as we have accused him of being, and does not become a criminal so frequently as we have been led to believe, nevertheless, he or his family in the great majority of cases present some sort of a social problem to the community—this is usually along the lines of relief or dependency; 70 per cent of these cases come from families which have registrations with the social agencies of Cincinnati; 13 per cent come from families which have registrations with more than six social agencies.

A great many types of social maladjustment were found in members of the families of these defective children—alcoholism, delinquency, illiteracy, as well as actual mental disease and mental defect, epilepsy, and the like, were found quite frequently. In all 380 such maladjustments were found in the families of these 162 individuals. More than one-third of the maladjustments were noted under the head of mental defect—37 sisters and 35 brothers had been diagnosed feeble-minded; 38 fathers and 9 mothers were known to be alcoholic; 7 mothers were sex delinquents; 5 mothers were suffering from epilepsy; 10 fathers and 12 mothers were illiterate, etc., etc.

One interesting thing that stood out in this investigation, was that those children handicapped by personality difficulties and serious psychopathic conditions, came almost invariably from families where there were a great number of social maladjustments; while those children free from these handicaps came from the best type of families, most industrious and socially adjusted parents, where home conditions were good.

Illustrative cases showing two sides of the picture—the feeble-minded girl who is a menace, and the feeble-minded girl who is an asset to the community.

CASE 9. A girl was married at the age of 16, had a baby at time of marriage. Her family had had contact with social agencies. Her Intelligence Quotient is 71. She spent four years in a special school. She now has 2 children. Since the birth of the first child she has had "spells" which resemble epilepsy. Her father is an alcoholic. She and her husband have records with the Ohio Humane Society and the Domestic Relations Court.

CASE 10. Woman—after leaving school earned \$6 week in a factory, had an illegitimate child, and at the age of 17 married a man who was not the child's father. Her parents' family had three clearings in the Confidential Exchange. Her Intelligence Quotient is 74 and she spent four years in Special School. Has one child by husband. They live in one of three

worst homes visited. She is apparently incapable of caring for either her children or the home in which they live.

CASE 11. A girl was married at the age of 16. She had a baby who died. At the age of 19 she has already been divorced and remarried. Her Intelligence Quotient is 64. The time in Special School is not given. Has had two children by second husband. Associated Charities and Hospital Social Service registered. Has been living in Jackson County, Ky., for two years.

CASE 13. A girl comes from a family with three clearings. Her father was a drunkard. She worked for \$5 a week before her marriage. She now has a child. Her intelligence quotient is 65 and she spent one year in the Special School. The family now has six clearings. Her father has deserted the family. She had a second child which the husband claims is not his. First child died. Neighbors reported that the mother had strangled it. Husband has left her. Judge refused divorce because she had been living with another man. Known to have lived with at least three men. Is now keeping two "boarders." A cousin who is a prostitute is her most intimate friend. Attempts to secure sufficient evidence to take the child from her have been unsuccessful. She has a feeble-minded mother who protects her and will give no information.

CASE 15. A girl was twice committed to the House of the Good Shepherd and is partially crippled with muscular trouble. On her family there are clearings with the Juvenile Court and the Free Dental Clinic. Her Intelligence Quotient is 72 and the time spent in the Special School is not stated. One child born two years after marriage. Is no longer interested in reading. History of sex offences before marriage. Mother and father live with her and the home ranks high.

CASE 18. Is a girl who had a drunken and neglectful father. She, her mother, and four of her brothers and sisters had cataracts. The family has eleven clearings in the Confidential Exchange. She married at the age of seventeen. Her Intelligence Quotient is not given but she spent four years in the Special School. She has two children, both partially blind—one has frequent spasms. They live in a squalid shanty in the hills of Kentucky in the summer. In the winter live with her people in Cincinnati. One brother is feeble-minded. The mother is illiterate and apparently very defective.

CASE 19. Is a girl who had a drunken father. She worked for about \$5 per week, had an illegitimate child and ran away from home. She is reported to be nervous and nearly blind. Her Intelligence Quotient is 73 and she spent four years in Special School No. 3. Married when 18, second child born. Blindness known to be due to congenital syphilis. She and her husband have five clearings with social agencies. She was a prostitute between birth of illegitimate child and marriage.

CASE 23. Is that of a woman who was married at the age of 20. She has a good home. Her father runs a restaurant. Her Intelligence Quotient is only 52. Because of repeated delinquencies she was twice committed to the House of the Good Shepherd, which served little to modify her conduct—later she was sent to the State Institution at Delaware. She has now one child and is in West Virginia.

CASE 25. A girl has an intelligence quotient of 48. Her father drinks, neglects the family and is sexually irregular. Her mother, who drank, died of tuberculosis in 1911. She has a brother who is a deserter, another who is an imbecile, and another who is syphilitic and feeble-minded. She married at the age of seventeen. She had a syphilitic baby which was found wrapped in a newspaper and which later died. She was taken into court but efforts to commit her to an institution failed. At the last report she had reunited with her husband after a separation. The additional information in this case has already been outlined in the discussion of the institutional cases. After four years, she was finally sent to the State Institution for the Feeble-minded.

Another side of the picture is shown in the following cases:

R.—Age 25; white; marital condition—single; Intelligence Quotient—60; personality make-up, no outstanding personality difficulties or marked character defect; physical condition, good; behavior history, no evidence of misconduct or social maladjustments; contacts of family with social agencies, none; home index, 15; neighborhood index, 15; industrial history, left school when 15 years of age, has been in present position three years—is now earning \$20 a week, has averaged 18 months in a job and has always received an increased wage as a result of each change, is now one of the highly skilled workers in a shoe factory. Employer's report, "steady, capable, efficient worker; is ambitious, and during the last three years has shown a real sense of responsibility."

D.—Age 18; white; marital condition—single; Intelligence Quotient, 58; personality make-up, no outstanding personality difficulties or character defect; physical condition, good; history of behavior difficulties, none; social agencies, one, Free Dental Clinic. The mother is an invalid, the home index is 15; the neighborhood index is 14. Left school when 16 years old, has held one job ever since she has been out of school. Began at \$10 a week and, now at the end of two years, is earning \$18 a week. She has had no children, has presented no social problem, but has been a decent self-supporting girl. Employer's report—"Regular and dependable. A splendid worker. Slow in learning, but never needs supervision. She is an expert packer in our cracker factory."

M.—Age 19; white; marital condition—single; Intelligence Quotient, 64; personality make-up, no outstanding personality difficulties or character defects; physical condition, good; history of behavior difficulties, none. Family's contact with social agencies, 3, one dealing with dependency, and two with health. Maladjustments in the family, one, a delinquent brother. Home index, 18; neighborhood index, 16. Industrial history, left school when 16, has had only one job. Began work three years ago basting in a tailor shop at \$12 a week,

is now assistant floor lady in the same establishment and is receiving \$22.50 a week. Employer's report—"Steady, good worker. Can operate any machine. If she is shown a thing once she always remembers it. Is a splendid teacher of other girls."

These three cases illustrate a group of cases which we have come across in this investigation that have led us to believe that feeble-minded persons, if properly trained, may be a real asset rather than a menace to the community.

SUMMARY

Of the 203 ex-students of special classes for defectives in Cincinnati that were studied by Dr. Woolley in 1918, the records of two have been lost, eight individuals have died since leaving school, three have become insane, six persons, on further investigation, were found not to be feeble-minded, two could not be located, and in the case of five individuals the data gathered was insufficient to warrant including them in this later study. There are in all then, 26 cases eliminated from the entire number, leaving 177 that will constitute the basis for this investigation.

Eight and five-tenths per cent of these persons are in institutions; 14.7 per cent are at home and have never worked; 23.2 per cent are at home but have a previous industrial record; six and two-tenths per cent are working for relatives; 42.9 per cent are in industry gainfully employed; four and five-tenths per cent are in the army and navy.

Sixty-three and eight-tenths per cent were men and 36.2 per cent were women.

Twenty-six of the women and 15 of the men have been married. There were 39 children born to the 26 women.

The wages received varied from \$5.00 a week to \$37.00 a week. Approximately 50 per cent are receiving wages of more than \$15 a week. Those individuals not handicapped by personality difficulties and character defects received much larger wages than those so handicapped.

Fifty-eight and four-tenths per cent of the group have been in one position for more than a year; while 40.3 per cent have held their present positions for two years or more. Those individuals handicapped by personality difficulties held their positions only for short periods; while practically all of those individuals holding positions for two and three years were in a large measure free from serious personality difficulties.

A wide variety of occupations appears to have been followed by these persons. They were by no means limited to odd jobs and the work of day laborers. Six were engaged in the building trades, eight as machinists, 27 were working in factories, three as salesmen, etc.

We have to revise in a measure our conception of the frequency of criminality among feeble-minded persons. Only 22.2 per cent of this group came in contact with any correctional agencies (courts and delinquent institutions.) Practically all of these cases were grossly handicapped by personality difficulties and character defect. It is our belief that we need to know more about a person than the mere fact that he is feeble-minded if we are to make any predictions as to his criminal conduct later on in life.

Thirty-one and six-tenths per cent live in homes which graded 17 or above, that is, in good middle-class homes or even better, while 41.2 per cent live in homes grading below 12, and offer distinctly unfavorable surroundings.

While these individuals have not in many instances been delinquent, yet, they come from families which have furnished many and varied social problems to the community. Seventy per cent of these cases come from families which have registrations with social agencies in Cincinnati.

ONE HUNDRED AND TWENTY-ONE MENTAL DEFECTIVES

For this study it will be remembered that all individuals diagnosed as feeble-minded by the Cincinnati Vocation Bureau during the years 1917-19 who would now be between the ages of 16 and 22 were taken for investigation.

Many of these had been examined at the request of the Work Certificate Office and of the Placement Office, others were referred by school principals, and others were sent by the various social agencies. In all there were 156 such cases.

CASES ELIMINATED

For some of the cases examined in 1917 and 1918, there was no identification aside from the name of the individual, and his address. When no names of others in the family were given and the address proved to be that of a Ninth Street boarding house it was only by the rarest good fortune that the present location of the individual was learned. There were therefore 32 cases which were finally eliminated from the study as "impossible to locate." If a longer time could have been given to the work undoubtedly some of these need not have been eliminated. One individual who was diagnosed five years ago as feeble-minded has since developed mental disease (*Dementia Praecox*.) Two were found to be in school and were therefore not included in a study of feeble-minded out in the community. Thirty-five cases in all, were eliminated leaving 121 for which fairly comprehensive data have been secured.

GENERAL DATA

NATIONALITY AND RACE

The group as a whole is made up largely of native-born individuals of native-born parents. One hundred and eleven, or 91.7 per cent were native-born. Only 10, or eight and three-tenths per cent were foreign born. Seventy-eight and five-tenths per cent were white and 21.5 per cent were black. Forty-six are men and 75 are women. Only 19 have been married (18 women and one man.) Only two of the women who have not married have been sexually promiscuous. Only one of the married women is now separated from her husband. She is considered a prostitute.

The present location of the entire group is shown in the following table:

TABLE I—PRESENT LOCATION

Location	Males	Females	TOTAL	
			Number	Per Cent
Institution	4	4	8	6.6
At home.....	9	36	45	37.2
In industry	31	35	66	54.5
Army or Navy.....	1	..	1	0.8
No information.....	1	..	1	0.8
TOTAL	46	75	121	100.0

Sixty-six individuals or 54.5 per cent are now employed in industry, and there is a record of previous industrial activity for an additional twenty. In short, 86 of the total 121 have at some time been in industry.

Sixty-two per cent of the total number of cases were handicapped by some personality difficulty or character defect. It is interesting to note that almost half of those in industry showed no personality difficulties, no evidence of character defect; while nearly two-thirds of those not employed showed such handicaps. As would be expected, those in industry have a much higher degree of intelligence than those unemployed, there being an average of approximately ten points difference in the I. Q.'s.

TYPE OF WORK

A variety of occupations appears from a tabulation of the various kinds of work these 66 individuals are doing. They may be divided for purposes of classification into the following groups: eight are sales-people, wrappers and shop girls, 33 are employed in factories, 12 are messengers, bell boys, etc., 5 are employed in house work, 3 are working for relatives, 5 are appren-

tices, printers, etc. The distribution of these types of employment between the men and women—and white and colored—is as follows:

TABLE II—TYPES OF WORK OF MENTAL DEFECTIVES IN INDUSTRY, CLASSIFIED ACCORDING TO RACE AND SEX

Work	White	Colored	Males	Females
Salespeople	8	..	5	3
Factory	31	2	7	26
Odd jobs	10	2	12	..
Relatives	3	..	3	..
Housework .....	..	5	1	4
Unclassified	5	..	3	2
TOTAL	57	9	31	35

All of those doing house work are colored. All of those under the heading of sales people are white.

WAGES RECEIVED

The wages received is shown in the following table:

TABLE III—PRESENT EARNINGS OF 62 OF THOSE NOW IN INDUSTRY, CLASSIFIED ACCORDING TO PERSONALITY

Amount Per Week	No Personality Difficulties	With Personality Difficulties
\$ 5 to \$ 9	7	7
10 to 14	13	21
15 to 19	7	6
Over \$20	1	..
TOTAL	28	34

It is seen from this table that 48 cases out of the 62 on whom information was secured have wages averaging \$10.00 per week and up to \$22. The only person earning over \$20.00 a week is an individual who suffered from no particular personality difficulties or character defect, eight of the 28 without personality difficulties were earning between \$15.00 and \$20.00 a week; only six of the 34 with personality difficulties are earning this much.

LENGTH OF TIME IN PRESENT EMPLOYMENT

The following table shows the length of time these individuals have remained in their present employment:

TABLE IV—LENGTH OF TIME IN PRESENT POSITION OF 63 OF THOSE NOW IN INDUSTRY, CLASSIFIED ACCORDING TO PERSONALITY MAKE-UP

No. of months	No personality difficulties	Inadequate	Emotional	All other personality difficulties	All with personality difficulties	Total
1 to 5	7	7	4	6	17	24
6 to 11	4	1	..	1	2	6
12 to 17	3	1	3	2	6	9
18 to 23	6	3	1	3	7	13
24 to 35	7	1	2	..	3	10
Over 35	1	..	..	..	..	1
TOTAL	28	13	10	12	35	63

**TABLE V—AVERAGE LENGTH OF TIME IN ONE JOB OF 63 OF THOSE
NOW IN INDUSTRY, CLASSIFIED ACCORDING
TO PERSONALITY**

No. of months	No. personality difficulties	Inadequate	Emotional	All other personality difficulties	All with personality difficulties
1 to 5	8	7	4	5	16
6 to 11	8	5	..	3	8
12 to 17	3	..	5	3	8
18 to 23	2	1	1	1	3
24 to 35	6	..	..	..	..
Over 35	1	..	..	..	..
TOTAL	28	13	10	12	35

Thirty-three individuals (more than half of the group) on whom information was secured have remained in their present place of employment from one to three years. These tables would indicate that those individuals with personality handicaps and character defects are liable to remain in a position only for short periods. The chances were two to one in favor of the individual without personality handicaps remaining in his job for six months, as compared to the individual with such handicaps.

There is also some relationship between the degree of intelligence and the length of time in a particular job. For 38 individuals with I. Q.'s of 60 and above, the median time in the last job was 14 months; for 25 with I. Q.'s below 60, the median time in the last job was 8.5 months.

RACE AND SEX IN RELATION TO WAGE RECEIVED

There are but nine negroes in this group who are now employed. It will be remembered that two are in factories, two work at odd jobs and five are employed as domestic servants. They receive wages varying from \$6.00 to \$16.00 a week. Two of the men have averaged \$13.00 a week since leaving school. With one exception they all fall in the lowest two wage groups both for present earnings and for the average amount received. Five of the nine have averaged less than six months at one job, and six have been less than six months in their present jobs. The negroes who are now employed have the least satisfactory industrial records of any group studied.

INDIVIDUALS WITH PREVIOUS INDUSTRIAL RECORD

There are 20 individuals who are now at home but have previously been in industry—15 of these are women and five are men; 15 are white and five are black; 11 are married (10 of the women and one of the men.) The reasons given for leaving the last place of employment are interesting—four of the men were “fired” and we have reports from the employers of “stupidity, lack of dependability, etc.”—the other man was “laid off” and the employer states that when business is better he will take him on again. Four of the women stopped work when they were married, two others before the birth of the first child, one woman was “fired;” six left for various reasons, “needed at home,” etc. Two colored girls have become prostitutes.

WAGES RECEIVED

The group is almost evenly divided between those who had only one, or at most two jobs and those who in the course of the two or three years since

leaving school have had two to fifteen jobs. A tabulation has been made therefore of either the one wage received or the median wage of a large number. A similar procedure has been followed in regard to length of time spent in one place of employment.

TABLE VI—WAGE RECEIVED AND LENGTH OF TIME IN ONE JOB FOR THOSE PREVIOUSLY EMPLOYED BUT NOW AT HOME

Amount Per Week	Number	Number of Months	Number
\$ 5 to \$ 9	8	1— 5	14
10 to 14	10	6—11	5
15 to 19	1	12—17	..
Over \$20	1	18—24	1
TOTAL	20		20

For but three individuals is there evidence of a fair degree of industrial success. One girl was earning \$22.00 a week when she stopped work three months before the birth of her first child. She had worked in three tailor shops, always as the assistant to her mother who was paid \$40.00 a week.

The other individual who received more than \$15.00 a week was a girl who had been excluded from school as a very low grade mental defective. She was employed at a meat packing house and had been receiving \$19.00 a week for nearly a year. She stopped work when seven months pregnant. Though she had a low I. Q. (45) she had no outstanding personality difficulties and was apparently achieving a fair degree of industrial success.

The one individual who remained longer than one year in one job was a boy who had been with an electrical supply house for two years. He began work at \$1 a week when he was 15. He was receiving \$9 two years later when he was laid off because of slack work. He also has a low I. Q. but suffers from no personality difficulties.

SUMMARY OF THE GROUP NOW AT HOME

The group as a whole is made up of industrially inefficient individuals. There are but two who do not give a history of serious personality or behavior difficulties. Eight of the fifteen women are sex delinquents. Three of the men and five of the women have been in correctional institutions. With one or two exceptions, the individuals who are now at home after a period of attempted employment present social problems. They have proved unproductive industrially. They contribute largely to the group of social misfits.

INDIVIDUALS NOW AT HOME WHO NEVER WORKED

There are four of the men and twenty-one of the women who have no industrial history. The men are without exception very low grade defectives. The women can be divided into two classes. About half have I. Q's of 50 or below. They have remained at home, usually helping with the work about the house. Of the others, many of them married within a year after leaving school.

No one of the men gives a history of behavior difficulties. Three of the girls have had illegitimate children. Three others are sex delinquents. One has been arrested for shop lifting. Two were incorrigible before marriage.

INSTITUTION CASES

There are at present, eight individuals from this group who are in institutions. Four are in the State Institution for the Feebleminded, in each case commitment was secured within one year after leaving school. Four are in correctional institutions. A history of them is given below.

CASE 1. One boy, now 16, because of general incorrigibility was placed in the Boys' Opportunity Farm. He had three jobs in the two months between the close of school and the time he was sent to the institution. He never earned more than \$8.00 a week. He has a feeble-minded sister who is a sex delinquent and a sister who has been in two hospitals

for the insane and is now a prostitute. The family has been handled by ten social agencies of Cincinnati. The boy has a mental age of eight and suffers from marked personality difficulties.

CASE 2. A colored boy now 18 is at the Lancaster Industrial School. For five years he worked at "odd jobs," boot black, driver, and janitor. His last employer reported him to the Juvenile Court for stealing a car and wrecking it. The employer further stated that he was incorrigible and untrustworthy. Two brothers are now on official probation from the Juvenile Court. Although his mother is married to a colored man it is probable that at least two of the boys had a white father.

CASE 3. A colored boy, now 19, has been sent to the Mansfield Reformatory. The charge against him was forgery. For three years after he left school he lived with his grandmother who apparently exercised to a remarkable degree, intelligent supervision over him. He worked steadily at fair wages, and there was no history of misconduct. After her death he would work a few weeks in one shop, quit, "rest" a week, and go to another. In less than a year he seems to have worked in very nearly every shop where printing was done. The end of the year found him in Mansfield.

CASE 4. Grace, a white girl, now 21 has two institutional records. Before marriage at 16 she had been sexually promiscuous, and when a son was born seven months after marriage, neither she nor her husband could state who the father was. When 19 she was sent to the Industrial School at Delaware. A year later when released she went to Texas. She admits frankly that she had sexual relations with several men while there and that money which she earned as a chocolate dipper went to the men she knew. When 20 she returned to Ohio and while visiting her brother in the northern part of the state she married without having received a divorce. One month later she was arrested for bigamy and in October, 1921, was sent to the Reformatory at Marysville with an indeterminate sentence. Her mother has had five children all illegitimate and each child had a different father. The three sisters are all known to be immoral.

HOME CONDITIONS

The distribution of the values given the homes and neighborhoods from which these mental defectives come is as follows:

TABLE 7—HOME AND NEIGHBORHOOD INDICES

Index	Home	Neighborhood
21—25	7	5
17—20	20	20
13—16	29	48
9—12	30	21
5—8	13	12
Unascertained	22	15
TOTAL	121	121

Twenty-seven cases live in homes which received a score of 17 and above, very favorable conditions for the children; 43 of these individuals came from homes grading less than 13, which indicates unfavorable condition surrounding the individuals living there; 13 persons came from homes receiving the very lowest rating possible. While fewer of the neighborhoods than of the homes from which these individuals come are in the highest group of indices, there are also fewer in the lowest group. Seventy-three individuals came from neighborhoods grading between 13 and 25—indicating that the majority lived among fair conditions in regard to sanitation, recreation, social status of residents, etc.

CONTACT WITH SOCIAL AGENCIES

Seventy-five per cent of these mental defectives come from families known to one or more of the social agencies of Cincinnati. Twenty per cent have had contact with more than four social agencies. Thirty-one families have had no contact with social agencies. Of the remaining 90 families, the average number of social agencies coming in contact with each family is three.

Amongst these 121 individuals there were many so-called "maladjustments" to be found within the families from which they came. Such conditions as mental defect amongst other members of the family, epilepsy, psychopathic conditions, invalidism, alcoholism, delinquency, sexual irregularities, non-support on the part of the father, etc., were to be found. In the families of 21 individuals no such conditions were found. In the families of the remain-

ing 100 individuals, the average number of such maladjustments was three and five-tenths. Of the total number of maladjustments noted, nearly one-third came under the head of mental defect. One-fourth of the maladjustments were evidences of delinquency—there were 18 mothers who were sex delinquents.

COURT AND INSTITUTIONAL RECORDS

Evidence of criminal conduct in this particular group has been carefully investigated. Our investigators made a careful search of court and institutional records, and went definitely into the question of delinquency in each case. As in our former study, we found no great evidence of criminal conduct. Only 22 persons out of this group of 121 have ever been in court or a delinquent institution—four of these are now in correctional institutions. One interesting thing found here as in the other section of this study was that those individuals who had shown delinquent tendencies were all handicapped by psychopathic conditions and gave evidence of personality difficulties. All of this delinquent group came from families with one or more social maladjustments. The home indices for this delinquent group was much lower than that of the non-delinquent.

The following are illustrative cases of mental defectives who have made successful adjustments in life.

W.—White; age 23; male; marital condition—single; Intelligence Quotient, 64; personality make-up, no outstanding personality difficulties or character defects; physical condition, good; has a slight stammer. Maladjustments in family—father deserted family; brother is feeble-minded. Home index, 15; neighborhood index, 17.

Industrial History. Left school when 16, has been at same place of employment ever since. Began as an apprentice in a machine and tool making shop; earned \$11 a week during his apprenticeship; for the last year has averaged \$37.50 a week. Employer's report—"Good worker, honest, capable and ambitious. Received a \$100 bonus when he completed his apprenticeship. This was received for efficient work. He is always prompt and neat."

C.—White; age 22; marital condition—single; Intelligence Quotient, 65; personality make-up, no outstanding personality difficulties; physical condition, good; behavior difficulties and misconduct, none; one blind brother. The family has had contact with three social agencies, all dealing with health; home index, 19; neighborhood index, 17.

Industrial History. Left school when 15. Has had three jobs, two of which have been in structural iron work. His present position, which he has held for three years, is that of a cutter in a shoe factory. He is at present earning \$35 a week. Employer's report—"Energetic, ambitious worker. Is sociable and affable in the factory."

B.—White; age 20; marital condition—single; personality make-up, no outstanding personality difficulties; physical condition, good; behavior, was in Juvenile Court once when ten years old for stealing. No further evidence of delinquent tendencies. Social agencies (a free clinic); home index, 18; mother and sister have spells which resemble epilepsy.

Industrial History. Has worked for five years in an electric supply house, first as an errand boy and now as a salesman. Present wage, \$25 per week. Employer's report—"Has initiative and is careful, intelligent salesman. One of the best workers the firm has."

Here we have a feeble-minded boy who is really making a success in life, and yet, some one when he was ten years of age and arrested for stealing, and in the Juvenile Court, may have predicted because of his feeble-mindedness, a serious criminal career.

We will make no effort to present a long series of cases, but think that a few of the statements made by employers relative to the abilities of some of these mental defectives might be interesting. The type of work and the report of their present employer is given.

FARM LABORER.—Employer's statement—"Doing well. Honest and reliable; stupid but a fine worker."

CHAUFFEUR.—Employer's statement—"Good, dependable worker."

AUTO MECHANIC.—Employer's statement—"Fine worker. When I opened a shop of my own I took him with me from the place we had been working at together."

MACHINIST.—Employer's statement—"Dependable, good steady worker."

TRAVELING SALESMAN.—Employer's statement—"Hasn't much book knowledge, but can sell goods. Thoroughly dependable."

ELECTRICAL WORKER.—Employer's statement—"Very good man. Capable, steady and ambitious."

MACHINIST.—Employer's statement—"In charge of all machinery in our steam laundry. If some machine shops knew what a good worker he really is, they would snap him up. The only things he can't do are to read and figure."

MACHINE HELPER.—Employer's statement—"Absolutely dependable but rather slow."

FACTORY WORKER.—Employer's statement—"Splendid worker. Always on time. Efficient and capable. In line for promotion, ambitious and has plenty of initiative."

FACTORY WORKER.—Employer's statement—"Childlike, quiet boy. Does his work well. Very steady."

PRINTER.—Employer's statement—"Reliable and steady. Has seldom missed a day for four years."

FACTORY WORKER.—Employer's statement—"Fast worker, steady—a regular utility man. Quick at picking things up."

J.—Colored; age 23; Intelligence Quotient, 53; personality make-up, no outstanding personality difficulties; physical condition, good; behavior, no history of any misconduct or delinquency; home index, 20; neighborhood index, 14; no maladjustment in the family.

Career since leaving school. Began work immediately after leaving Special School for defectives; has held three jobs; has never been less than a year in a job, and has been in his last place of employment 22 months. He is a delivery errand boy for a firm of wholesale tailors. He receives \$16 a week for this work. The employer's report is as follows—"Regular and obedient. He is not intelligent but always does what he is told and does it well."

M.—White; age 30; female; Intelligence Quotient, 56; personality make-up, no outstanding difficulties of personality or character defects; physical condition, fair; home index, 18; neighborhood index, 25.

Career since leaving school. Was a student at Special School for Defectives until after she was 20. Since that time she has remained at home taking care of her invalid mother. They have furnished housekeeping rooms and she does all of the work under the supervision of her mother. After the death of her father, 20 years ago, the mother undertook to carry on his real estate business, and though she is confined in a wheel chair all of the time, by using M. as a messenger, she has succeeded in maintaining herself and her defective daughter.

J.—White; age 19; female; Intelligence Quotient, 64; personality make-up, no particular handicaps, but slightly inadequate in make-up; physical condition, thin, restless, nervous type—in fair health; home index, 20; neighborhood index, 25.

Career since leaving school. When she stopped school at 17 she was in the third grade. She is the youngest of nine children. One of the older sisters has devoted almost her entire time to J. After three years at home, she took a position as a filing clerk in a wholesale house. The older sister carefully supervised her work for a time, and at present she is getting along nicely and earning \$15 a week.

In order that we might refresh our minds as to the more common types reported in the usual investigations of feeble-mindedness, we will record the following two cases, not because they were the worst, nor the best, but simply because they were the first two cases of unsuccessful careers that we came across.

L.—White; age 19; male; marital condition—single; Intelligence Quotient, 45; personality make-up, egocentric, inconsiderate, unappreciative, difficult to get along with; physical condition, good; behavior, has been in court for stealing; social agencies, six (three dependency, two delinquency, one health); home index, 13; neighborhood index, 15; mother and father divorced.

Industrial History. Began work when 14, has had 12 jobs in five years and has averaged less than a month in any one of these positions. He is at present a "bus boy" earning \$9 a week. Some of his reasons for leaving former positions are as follows. "Didn't get sick benefit, so I left." "Discharged." "Got into a fight with the man over me." "Had a quarrel with the boss." Employer's report—"Disobedient and incompetent."

B.—White; age 18; male; Intelligence Quotient, 64; shows very definite and outstanding personality difficulties and character defects; is in poor physical condition—is thin, nervous and restless—smokes incessantly; is known as a bum around the cheap dance halls of the district. Family has had contact with four social agencies (one dependency, two delinquency and one health). The father is alcoholic, a brother is alcoholic and has deserted his wife and child, the mother is feeble-minded, a sister is feeble-minded, and the mother and father are divorced.

Industrial History. Began work when 15 years old. In the first year he had 16 jobs. He gives the following reasons for leaving positions: "Mother didn't want me to work there." "Not enough money." "Fired because sick one day." "Didn't pay enough." "Laid off." "Work slack." "Acid spoiled my clothes, so quit." "I didn't like the work." "Didn't like it. The work was too heavy." His present employer reports—"Getting careless. Will be discharged at the end of the month unless he does better work. His work is very easy and requires no intelligence."

The above cases were not presented because they were particularly striking, but simply because they represented two very different types that should be reckoned with in any program for dealing with the feeble-minded—"The good mental defective, and the bad mental defective."

SUMMARY

One hundred and twenty-one mental defectives diagnosed by the Cincinnati Vocation Bureau during the years 1917 and 1919 were taken for this investigation. They would now be between the ages of 16 and 22 years. The

reasons for their examination were principally requests of the Work Certificate Office and the Placement Office, and school principals, for a diagnosis.

The group is made up principally of native-born individuals of native-born parents. Seventy-eight and five-tenths per cent were white and 21.5 per cent were black; 46 were men and 75 were women; only 19 have been married (18 women and one man.)

Six and six-tenths per cent are in institutions (four persons in correctional institutions and four in the institution for the feeble-minded.) Thirty-seven and two-tenths per cent are at home and not employed; 54.5 per cent are in industry; eight tenths per cent in the army and navy; eight-tenths per cent no information.

Sixty-two per cent of the total number of cases were handicapped by some personality difficulty. One-half of those now in industry showed no evidence of personality difficulty or character defect; while two-thirds of those not employed showed such handicaps.

A variety of occupations appears. Eight are salespeople, 33 are employed in factories, 12 are messengers, bell boys, etc., five are employed in housework, three are working for relatives, five are apprentices, printers, etc.

Forty-eight of the 66 persons in industry are averaging from \$10 to \$22 per week in wages.

Thirty-three individuals (half of the group) have remained in their present place of employment from one to three years. This study shows that those individuals with personality handicaps are liable to hold their positions only for short periods, while those without such handicaps, remain much longer.

Twenty-seven individuals lived in homes scoring 17 or above, indicating very favorable conditions for the children; 43 of these individuals came from homes scoring less than 13, indicating unfavorable conditions surrounding the individuals living there; 13 came from homes receiving the very lowest rating possible.

Seventy-five per cent of these mental defectives come from families that have had one or more contact with social agencies of Cincinnati; 20 per cent come from homes that have had contact with more than four social agencies.

Criminal conduct was not very frequent amongst these 121 mental defectives, there being only 22 persons who had ever been in court or in a delinquent institution.

SUMMARY AND CONCLUSIONS

The purpose of this investigation was to study the social adjustments and the industrial careers of an unselected group of mental defectives, in an attempt to discover wherein they had succeeded or failed, and what were the factors which caused their success or failure. Data touching on these points has now been presented for 177 ex-students of special classes for mental defectives, and 121 mentally defective individuals who were examined at the Vocation Bureau and are now out in the community.

The two groups overlap both in age distribution and in number of years out of school. The ex-students of special classes ranged in age from 18 to 30 years; the 121 mental defectives examined at the Vocation Bureau ranged in age from 17 to 22 years. The individuals in the first group have been out of school from four to eight years; those in the second group have been out of school from one to six years. Both groups were unselected. None of them were chosen because they had become serious social problems. All of them were chosen for the one reason—that they gave evidence of mental defect. For the purpose, then, of a general summary, the data on the two groups may be combined.

Two hundred and ninety-eight cases remained for study after the exclusion of 26 persons (reasons for which have already been given in the context of the report.) Of these 298 cases, 19 are in institutions for the feeble-minded, four are serving sentences in correctional institutions, 142 are employed in industry, 11 are working for relatives, nine are in the army and navy, 71 are at

home and have never worked, 41 are at home but have previous industrial records, and in the case of one there was no information obtained.

Approximately half of the 298 cases are gainfully employed in industry, and are providing no particularly serious social problems for society (all of this without the exercise of any serious effort at supervision and aid by the community.) If this can be said of an unselected group of feeble-minded persons for whom society has not made especial provision in the way of industrial and vocational training, after-care and supervision, then what may we not accomplish under a purposeful plan and comprehensive program?

These individuals were by no means limited to odd jobs and simple day labor in their occupations. There were 11 salesmen or salesladies, eight machinists, six construction workers (building trades), five printers and apprentices, 60 factory workers, 12 messengers and bell boys, 11 doing housework for others, etc.

Approximately half of those in industry were earning wages of \$15 a week and more. We found in both studies that those individuals not handicapped by personality difficulties and character defects, received much higher wages than those so handicapped. We found, also, that those who were out in industry were far less likely to be handicapped by character defects and personality difficulties than those who were unemployed.

Approximately half of those individuals who were out in industry have remained in their present positions for longer than a year. We found quite a large group who had remained in their present jobs for two and three years. Here, as elsewhere, we found that the battle was in favor of those who were not handicapped by psychopathic conditions and personality difficulties.

We made the statement that there has been an exaggeration concerning criminal tendencies of the feeble-minded. Only 22.2 per cent of the first group, and 18.2 per cent of the second group have ever been in court or delinquent institutions.

While these individuals have not in many instances been delinquent, yet they come from families which have furnished many and varied social problems to the community. Seventy per cent of the cases in the first group, and 75 per cent of the cases in the second group come from families which have registrations with social agencies in Cincinnati.

This study has led us to believe that mentally defective persons may be handled with success by other than institutional measures. We have been impressed with the fact that those elements that go to make for the failure or success of mental defectives in life are in no sense different from those elements that affect the lives of normal persons. Those same elements of character and personality make-up, those same conditions in the home, and those same factors in training that speak for the successful career of a normal child, bear with equal force on the career of the feeble-minded child.

In the light of this study, we are convinced that a large proportion of feeble-minded persons can be handled economically and safely out in the community if properly trained and adequately supervised. With such training and supervision it is clear that feeble-minded individuals who would otherwise become delinquents or dependents can be expected to develop into decent, self-supporting citizens and thus save the state millions of dollars for their maintenance. The keynote to the whole program is to be found in early recognition, adequate training, proper supervision, and in the case of those who are a menace—final segregation. Such a program would then contain the following points:

- A. Mental examination, by properly equipped persons, of all mentally defective children in the public schools.
- B. Special class training along manual, industrial and vocational lines of all mental defectives.
- C. After-care, kindly and friendly supervision of all mentally defective children in need of such.

- D. Greatly increased institutional provision for those now in the community who are a menace to the general public.
- E. The development of the colony system. A large proportion of the feeble-minded can be usefully and profitably employed if intelligently directed. They can clear waste land, grub bushes, remove stones, build fences or roads, drive teams of horses or oxen, feed pigs, milk cows, take care of chickens, cultivate land and gather crops. They can excavate for buildings, haul stones, make bricks and cement blocks. The girls make splendid domestic servants and may be handled satisfactorily in colony groups according to the New York plan, originated by Dr. Bernstein.
- F. Adequate equipment of state institutions for the feeble-minded, for the purposeful training of all feeble-minded children who are capable of profiting by such training.
- G. Provision for parole out into the community, under careful supervision, of those mental defectives, who—after a period of prolonged care and intensive training—have developed such desirable traits of character (industry, ambition, obedience, appreciation, etc.) as to render it likely that they can be handled with safety and profit out in the community.

RECOMMENDATIONS FOR A STATE MENTAL HYGIENE PROGRAM

(The following recommendations are offered as a basis for a comprehensive state program. These recommendations also include the state program which was prepared by Dr. Thomas Salmon, Medical Director of the National Committee for Mental Hygiene, in that phase of the Cleveland Hospital and Health Survey that dealt with mental diseases and mental deficiency.)

1. State administration and supervision of the institutional care and treatment of persons with mental disease, mental deficiency and epilepsy, and of their guardianship in the community. Legislation is recommended that will accomplish the following objects:

(a) Establishing a special Division of Mental Hygiene within the State Department of Public Welfare for the performance of the functions mentioned above. Such a division (headed by a physician experienced in dealing with the institutional and social aspects of mental disorders) to administer the State Hospitals for the Insane, the State Institution for the Feeble-minded, the State Hospital for Epilepsy and the Bureau for Juvenile Research, and to concern itself with the broad medical and community relationships of these disorders, as well as with the business administration of the institutions.

Such a division, aside from the administration of the above mentioned state institutions and the licensing and inspecting of private institutions for the care of mental patients, would have certain bureaus for the accomplishment of other very definite services. A Bureau of Clinics will organize "flying clinics" from state hospitals, Juvenile Research Bureau, and state institutions for the feeble-minded, to serve public schools, juvenile courts and various communities of the state, while a Bureau of Social Service will have to do with the after care, parole and social service work in connection with paroled patients, and with the community supervision of mental defectives.

2. Better institutional provision for the treatment of persons with mental diseases.

(a) Providing adequate salaries for superintendents of state hospitals, assistant physicians, nurses, and occupational instructors, in order that more efficient treatment may be built up.

(b) Providing clinical directors of psychiatry in all state hospitals, to be responsible for the scientific work and for the supervision of all training.

(c) Providing training schools for nurses and attendants in all state hospitals, and a supervisor of nursing in the proposed State Division of Mental Hygiene, to supervise and standardize such instruction.

(d) Instituting active after care and social service so that more patients may be paroled, and by following their supervision into the community, the durability of recoveries and remissions increased.

(e) Instituting a system of mental clinics in the district of each state hospital for after care and preventive work, and in cities, co-operating with existing mental clinics, so that after care patients may be seen by the physicians who have them under their care while in state hospitals.

(f) Providing stewards in state hospitals so that superintendents will be relieved from the administrative details that occupy a larger part of their time than supervising and developing medical activities.

3. A comprehensive state program for dealing with the feeble-minded and epileptic, to include:

(a) A systematic mental examination of all children in the public

schools who are retarded three or more years. (Provision should be made for the routine accomplishment of this throughout the state.) In large cities clinical facilities can be developed in connection with existing clinics and departments already maintained by schools and other agencies. In rural district "flying clinics" from state hospitals state institutions for the feeble-minded and the Juvenile Research Bureau can supply the required physical and mental examinations. Some standardization of this work should be maintained and no child should be admitted to a special class until he has received the required physical and mental examination. All of this work, as far as the public schools of the state are concerned, should be done under the authorized supervision of a psychiatric advisor to the State Department of Education who may also be the chief of clinics in the Division of Mental Hygiene. It should be remembered that these school clinics should contain all of the facilities that psychiatrists, psychologists and psychiatric social workers can bring to bear upon the mental problems of school children—all of the resources of medicine and psychology instead of only those that deal with the measurement of intelligence.

Another thing that should be borne in mind and that is that the scope of the study of the unadjusted school child should include other mental problems than mental deficiency. Above all, the aim of treatment should be made as prominent as diagnosis.

The school clinic should be made use of by parents and teachers, for not only the mentally defective child, but the psychoneurotic child, the psychopathic child and those presenting conduct disorders.

(b) Probably for generations to come the burden of training the majority of mental defectives will rest largely upon the shoulders of public school authorities, so that whatever training most defectives are to receive will be in the public schools. Every feeble-minded child should receive special class instruction along such lines as will equip him for something useful in life. The training should be essentially industrial and vocational and not academic. Legislation making provision for special classes in every community in the state where there are ten or more such mentally defective children, and authorizing the payment by the State Department of Education, of a fixed sum—to the local school authorities—for each such class maintained, is recommended. The State Department of Education should maintain a state director or supervisor of such classes who should have charge of all special class work done in the state. This refers not only to the classes for defective children, but to those for retarded children, and those for the deaf and dumb, for the blind, the epileptic, and those suffering from speech disorders.

(c) The most important phase of this entire program for dealing with the feeble-minded, is that of state-wide supervision. There should be created within the Division of Mental Hygiene a Bureau that will have as one of the most important phases of its activities the supervision of the feeble-minded in the community. To this Bureau could be committed delinquent and dependent feeble-minded children graduating from special classes in the public schools, or those who are already out in the community and need supervision; also this Bureau could be charged with the supervision of those well-trained defectives who are at the state institution but are ready for parole out in the community. In this way it will be possible to continually make provision for beds at the state institution for the most urgent cases. We believe that the community supervision of the feeble-minded is a phase of this program second to none in importance.

(d) Increased institutional provision for the feeble-minded and epileptic.

Estimating the frequency of feeble-mindedness on the basis of the army figures and the various state-wide surveys of this condition, conducted by the National Committee for Mental Hygiene, we would place

the total feeble-minded population of this state between 25,000 and 40,000 persons. At least one-third of these will need a period of institutional care, treatment and training. It is not believed that Ohio is doing more than touching the surface of the problem of mental deficiency in its present provisions for institutional care. It must be remembered that expense is no excuse. These persons are already an enormous expense to the general public, and their maintenance one way or another is being provided for out of the public purse—though it may not appear in terms of a legislative budget. The colony system is becoming more and more popular throughout this country. We would recommend the development of colonies in connection with the state institution for the feeble-minded.

(e) Parole of well trained, carefully selected feeble-minded persons out into the community.

The success of this endeavor upon the part of certain institutions for the feeble-minded has been so striking, that it is now generally agreed that this departure is changing the whole aspect of the institutional care of the feeble-minded. A great many institutions are now paroling large numbers of well-trained mental defectives with success. This has made the old-time custodial institutions a thing of the past, and has caused institutional authorities to center their work upon intensive training along vocational lines.

The above mentioned Bureau within the Division of Mental Hygiene of the State Department of Public Welfare should be charged with the supervision of these paroled cases.

4. In the light of the importance that this and other studies has given to the mental condition of the offender, we would recommend legislation requiring a mental and physical examination of all inmates of state penal, correctional and delinquent institutions; repeated offenders in adult courts, and all problem children in juvenile courts. We believe that the most important step in the prevention of crime will be made when juvenile courts equip themselves with machinery for the careful study of all problem children that appear in court.
5. Legislation is recommended that will accomplish the following objects in the way of improving commitment laws for the feeble-minded and insane:

(a) Provision for voluntary commitment of feeble-minded children to institutions for the feeble-minded. (In case the superintendent of such an institution finds that the return of the child to the community is unwise, he may have the regular court procedure of commitment instituted.)

(b) Parole of properly trained, carefully selected institutional cases to the community under the supervision of parole officers. (This parole should be for an indefinite period, depending upon the social adjustment of the individual, and not for any fixed time limit.)

(c) Committing mentally defective children and adults to guardianship and community supervision with provision for transfer from this form of commitment to institutions, and vice versa.

(d) Committing children and adults for observation for a period of ten days to state institutions for the feeble-minded, state hospitals for epileptics, psychopathic hospitals, psychopathic wards in general hospitals, or the Bureau of Juvenile Research.

(e) Eliminating the age of consent in mentally defective women and girls who have been committed to institutions or to guardianship and community supervision.

(f) Authorizing sending nurses and attendants from state institutions for the feeble-minded and state hospitals to bring from their homes or places of temporary detention, patients who have been committed and

are awaiting transfer—thus eliminating the services of sheriffs and police officers.

(g) Authorizing counties to pay examining physicians, salaries instead of fees, for their services when mental examinations are made in psychopathic hospitals, psychiatric clinics, psychopathic wards in general hospitals or other mental clinics maintaining satisfactory standards.

(h) Authorizing the proposed Division of Mental Hygiene of the State Department of Public Welfare to inspect places for the temporary detention of mentally defective persons, and homes and schools in which delinquent or dependent children are maintained.

(i) Removing present restrictions as to number of volunteer patients that can be received in state hospitals.

(j) Committing patients for observation for a period of ten days to state hospitals, psychopathic hospitals and psychopathic wards in general hospitals.

(k) Prohibiting the detention of persons awaiting commitment in jails or almshouses and placing the responsibility for their care pending commitment and reception in state hospitals in the hands of health officers, except in cities where suitable facilities are otherwise provided.

(l) Discontinuing the personal appearance of mental patients in court.

(m) Admitting patients to state hospitals in emergencies upon the certificate of two physicians, such admissions to be followed within ten days by discharge or court commitments.

(n) Committing to state hospitals any persons under trial in whom mental disease is suspected upon order of any trial judge, such commitments being for observation only and for a period not less than ten nor more than thirty days.

6. Mental Hygiene Committee.

The newly organized Committee for Mental Hygiene should receive the support of all those who desire to see the state assume the duties that rightfully belong to it so that local agencies need not continue devoting a large part of their resources to the performance of tasks that arise chiefly from the state's negligence. Not until the state has met its obligation to provide for the mentally defective and epileptic will the local agencies—both public and private—be able to devote themselves exclusively to the work for which they were created and are maintained by public funds or private philanthropy. A strong State Committee for Mental Hygiene, with definite objects and strongly supported by public spirited citizens, can do more to accomplish these ends than any other type of private agency.

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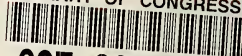
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